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The Royal Sanitary Institute

Seventy-Fourth Annual Report of the Director of Public Health for the Government of Bombay, 1937

With Appendices

BOMBAY
PRINTED AT THE GOVERNMENT CENTRAL PRESS
Obtainable from the Superintendent, Government Printing and Stationery, Bombay, or through the High Commissioner for India, India House, Aldwych, London, W.C.2, or through any recognized Bookseller

Price—Re. 1 As. 7 *or* 2*s.* 6*d.*

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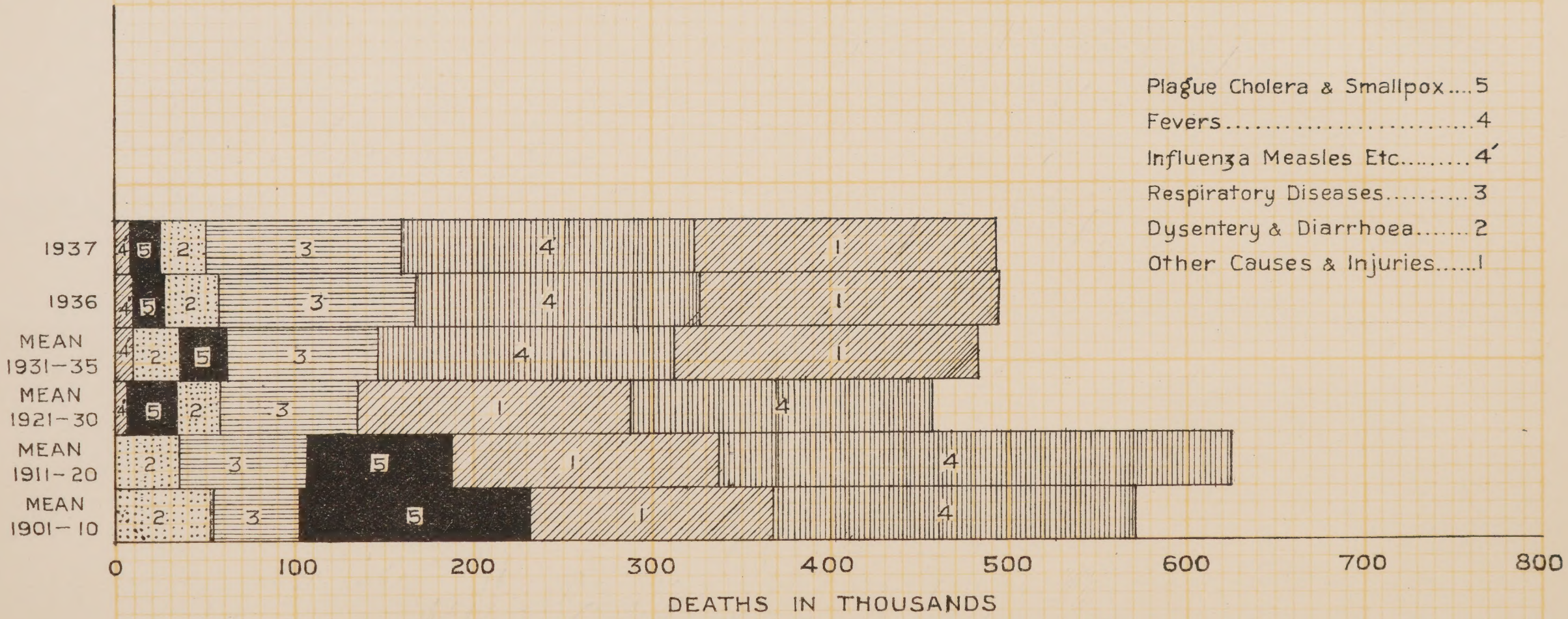
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CHART I

DEATHS IN 1937 AND PREVIOUS YEARS.



G.P.Z.O. POONA, 1938.

ANNUAL REPORT ON PUBLIC HEALTH FOR 1937.

CHAPTER I.

Meteorology : Economic Conditions, i.e., Prices of Food Grains, etc.

1. *Rainfall.*—There was scarcely any rain of importance in the Province till the middle of June. The latter half of the month gave fairly good and general rain over most of the Province except in the eastern portions of the Deccan and the Karnatak. The characteristic feature of the rainfall in July was its excess over the normal in almost the whole Province except the eastern portion of the Karnatak. In August, the rainfall was deficient almost throughout the whole Province. There was ample rain during the month of September in the Surat District, general rain in the Northern Division and fairly substantial rain in the Deccan and the Konkan. There was widespread and fairly substantial rain over most of the Province in the month of October.

Gujarat.—In June, the rain proved somewhat excessive in parts of Gujarat. It was in excess over the normal in July and deficient in August. During the month of September the rain was ample in the Surat District while there were only a few light and scattered showers in October.

Konkan.—The rainfall was somewhat excessive in June and excess was particularly marked in the month of July. The deficiency of rainfall was not so marked in the Konkan during the month of August. The rain was fairly substantial in September and October.

Karnatak and Deccan.—In the first half of June there was scarcely any rain and in the second half it was only light to moderate. In July it fell much below the amount usually received while it was in excess in the Konkan. During the month of August, the rainfall was fairly substantial and evenly distributed while in September it was deficient in the Karnatak. In October it proved injurious to the rice crop in parts of the South Deccan and it was meagre in amount in the Karnatak towards the end of the month.

2. *Prices of food grains.*—The prices of food grains in the Deccan and the Gujarat were higher than those in the previous year by 15 per cent. and 21 per cent. respectively but lower by 12 per cent. in Bombay city, 19 per cent. in the Konkan and 20 per cent. in the Karnatak.

CHAPTER II.

Vital Statistics (including Population and Emigration and Immigration).

3. The Province is divided into three Registration Districts comprising of twenty-one Collectorates (including Bombay City), one hundred and eighty-three Rural Circles (Talukas and Mahals); eighty-six Town Circles and six Cantonments. These divisions are shown in Appendix III to this Report.

Population.—The birth and death ratios are calculated on the census population of 1931. According to this census the population of the Province is 17,932,368 and is distributed as below :—

Rural circles 14,373,511 ; Town circles 3,492,657 and Cantonments 66,200. This population includes the figures for Europeans and Anglo-Indians also. Separate information by localities for these communities is not available.

4. *Estimated Population.*—The estimated population for the year 1937 for the Bombay Province and the birth and death rates calculated thereon are given in the following table :—

Census population. 1931.	Estimated mid-year population of 1936.	Estimated mid-year population of 1937.	Number of births, 1937.	Birth-rate per mille of estimated population.	Number of deaths in 1937.	Death-rate per mille of estimated population.
17,932,368	19,149,124	19,383,774	729,476	37·63	493,208	25·44

The estimated mid-year population for the year 1931 excluding migration was calculated to be 18,023,509 according to the method of "natural increase". The mid-year population for subsequent years has been calculated by the same method. The figure for 1937 thus obtained is 19,383,774. The birth and death rates per mille of estimated population for the year 1937 work out to 37·63 and 25·44 respectively as against 40·68 and 27·50 calculated on the census population of 1931. The birth and death rates on estimated population for the year 1936 were 38·77 and 25·96 respectively.

5. *Changes in Area.*—In Surat District three deserted villages viz., Muroli, Balwandia and Timbarni have been amalgamated with Khad Supa village of Jalalpore Taluka. In West Khandesh District three villages, viz., Burudkhe, Raykot and Lagadwatal of Nawapur Peta have been transferred to Sakri Taluka from 1st March 1937.

European and Anglo-Indian Vital Statistics.

6. *Europeans.*—The European population according to the census of 1931 is 18,028. In 1937 the number of births recorded was 229 against 254 in the previous year giving a ratio of 12·70 per mille of population against 14·09 in 1936. Of the births 114 were males and 115 females against 120 and 134 in the previous year. There were 124 deaths giving a death rate of 6·88 as compared with 132 and 7·32 respectively in 1936. Of these deaths 77 were males and 47 females against 87 and 45 in the preceding year.

7. *Anglo-Indians.*—The population according to the census of 1931 is 14,176. The number of Anglo-Indian births registered was 217 against 230 in 1936. The birth-rate per mille of population for the year under report was 15·31 as compared with 16·22 in the previous year. Of the births 105 were males and 112 females against 126 and 104 in 1936. There were 144 deaths as compared with 143 in 1936, the death-rate being 10·16 against 10·09 in the preceding year.

Deaths by ages.—The age distribution of deaths among Europeans and Anglo-Indians is shown in the following table :—

Age periods.	Deaths, 1937.	
	Europeans.	Anglo-Indians.
Under 1 year	20	26
1–5 years	4	16
5–10 ,, ...	....	3
10–15 ,, ...	....	2
15–20 ,, ...	3	4
20–30 ,, ...	11	6
30–40 ,, ...	11	16
40–50 ,, ...	16	22
50–60 ,, ...	18	18
Over 60 years	41	31
	124	144

The causes of deaths among Europeans and Anglo-Indians are as shown below :—

—	Year.	Cholera.	Small-pox.	Fever.	Dysentery and Diarrhoea.	Respiratory Diseases.	Injuries.	All other causes.	Total.
Europeans ..	1936	..	..	13	11	17	10	81	132
	1937	..	1	7	3	19	14	80	124
Anglo-Indians ..	1936	2	1	11	18	27	6	78	143
	1937	..	..	8	17	30	5	84	144

Vital Statistics of Indians.

8. *Births.*—The total number of births registered during the year under report was 729,476 against 742,331 during 1936, showing a decrease of 12,855 over that year, but an increase as compared to the previous three decennial mean figures viz., 1901-10, 551,158 ; 1911-20, 598,493 ; and 1921-30, 613,564.

The number of births recorded in the previous years and the corresponding birth-rate were as below :—

Years.	Births.	Birth-rate.
1901-10 mean	551,158	36·08
1911–20 ,, ...	598,493	37·21
1921–30 ,, ...	613,564	38·58
1931–35 ,, ...	710,426	39·61
1936	742,331	41·40
1937	729,476	40·68

9. *Provincial birth-rate compared with birth-rates of other provinces.*—The birth-rate in Bombay Province for the year was 40·68 against 41·40 during 1936. The rates recorded in the Provinces of India for the last two years show a decrease in birth-rate in all the Provinces except

Madras, Bengal, Assam and Burma as may be seen in the table below :—

	1936.	1937.
Madras	37·76	38·72
Bengal	33·53	34·20
Assam	30·24	31·31
Burma	34·27	34·55
Bihar	35·34	34·00
Orissa	36·63	34·75
United Provinces	38·99	35·92
Punjab	46·85	46·49
Central Provinces	42·50	40·65
North-West Frontier Province	32·64	30·74
Sind	20·52	19·96
Bombay	41·40	40·68

In 1936 the highest birth-rate since 1901 was recorded. The birth-rate along with other vital statistics ratios generally comes down in the year after the census but it is a hopeful sign that in 1937 when we are nearing the census the birth-rate has decreased. This decrease may continue till this high birth-rate comes down to an optimum figure compatible with the economic condition of the province. The abnormally high birth-rate has been a drain on the health of the mothers and on the resources of the fathers ; the high maternal and infant mortality rates are also largely influenced by this factor.

10. *Birth-rates in Collectorates.*—Of the twenty districts in the Province the highest birth-rate was recorded in Broach District (52·28) and the lowest in the Bombay Suburban District (25·87). Eleven districts returned a birth-rate of 40 or more per mille of population, two having rates above 50 and nine between 40 and 50. Seven districts had rates between 30 and 40 and two under 30. In the Province the birth-rate for rural areas was 41·86 and for urban areas 35·90 against 42·60 and 36·53 in 1936. As compared with the mean of the previous five years there is an increase in the birth-rate of the following districts as shown against each :—Broach (4·49), Ahmedabad (3·49), Kaira (2·92), Belgaum (2·75), Panch Mahals (2·66), Bombay Suburban (2·51), Dharwar (2·26), Bijapur (1·72), West Khandesh (1·29), Surat (1·19), Satara (·88) and East Khandesh (·40). A decrease is noticeable in the districts of Ahmednagar (4·49), Thana (3·67), Poona (3·11), Sholapur (1·79), Kolaba (·73), Nasik (·68), Kanara (·32) and Ratnagiri (·11) as compared to the mean of the previous five years. In Kanara District however there is an increase of 1·89 in the birth-rate as compared to the previous year. In 1936 Kanara District was the only exception to the all round increase in the birth-rate. As compared to the mean of the previous 5 years the decrease in this district in 1937 is slight and as compared to the previous year there is actually an increase of 1·89. The birth-rate in Ahmednagar, Poona and Sholapur is lower than in 1936 ; it is significant that in these districts scarcity was declared towards the end of the previous year. Thana District which also showed a decrease

was free from scarcity but in this district the birth-rate fluctuates at times for reasons which are not known.

11. *Birth-rates in rural areas.*—Of the one hundred and eighty-three talukas, petas and mahals in the Province, one hundred and forty-seven, i.e. 80 per cent. returned rates over 35 per mille of population. Twenty-one of these areas returned birth-rates over 50 per mille ; eighty-nine areas, birth-rate between 40 and 50 per mille and thirty-seven areas, birth-rate between 35 and 40 per mille. Birth-rates between 30 and 35 per mille were returned by twenty-five areas and rates below 30 per mille were returned by eleven areas comprising 6 per cent. of the total areas. The rates varied from 70·32 per mille in Mulshi Peta in Poona District and 61·40 per mille in Bardoli Taluka of Surat District to as low a figure as 20·50 in Ambernath Taluka in Bombay Suburban District and 21·17 in Poona City Taluka. In Ambernath Taluka there is a rise in the birth-rate during the year as compared to the figure of 19·60 recorded in 1936. The low rate is mainly due to the preponderance of male population in this industrial area. In Poona City Taluka defective registration alone appears to be responsible for the low birth-rate.

12. *Birth-rate in urban areas.*—Out of the eighty-five urban areas in the Province forty-two returned birth-rates exceeding 35 per mille. Very high birth-rates were recorded in the town of Broach (67·54), Borsad (57·69), Ahmedabad (56·56), Bagalkot (56·04) and Dholka (55·15). The number of towns reporting birth-rates between 30 and 35 and 20 and 30 per mille of population were twelve and twenty-one respectively. The remaining ten towns recorded birth-rates under 20 per mille of the population as follows :—Chopda 19·69, Kalyan 19·13, Islampur 18·91, Manmad 18·02, Poona Suburban 17·57, Sangamner 17·45, Ratnagiri 17·18, Bhiwandi 17·03, Junnar 11·63 and Uran 10·86. These low rates are mainly to be attributed to the defective registration of births in those urban areas.

13. *Births in Bombay city.*—The births recorded in Bombay city were 35,174 against 35,604 during 1936 equivalent to a birth-rate of 30·29 per mille or a decrease of ·36 as compared to the preceding year.

14. *Births in Cantonments.*—The following birth-rates were recorded in Cantonments :—Kirkee 38·69, Ahmedabad 34·11, Ahmednagar 21·18, Poona 18·36, Deolali 14·56 and Belgaum 7·54.

15. *Births according to sex.*—Out of the 729,476 births, 376,426 were males and 353,050 females equal to ratios of 20·99 and 19·69 per mille of population as compared with 382,054 and 360,277 and 21·31 and 20·09 respectively in the previous year. For every 100 female births there were 106·62 male births, the previous year's ratio being 100 to 106·04.

16. *Still-births.*—The number of still-births registered during the year was 12,050, i.e. 1·65 for every 100 live-births as against 12,515 and 1·88 respectively during 1936. The percentage of still-births to live-births recorded varied from ·25 for Ratnagiri District to 5·10 for

DEATH RATE AT EACH AGE PERIOD 1937.

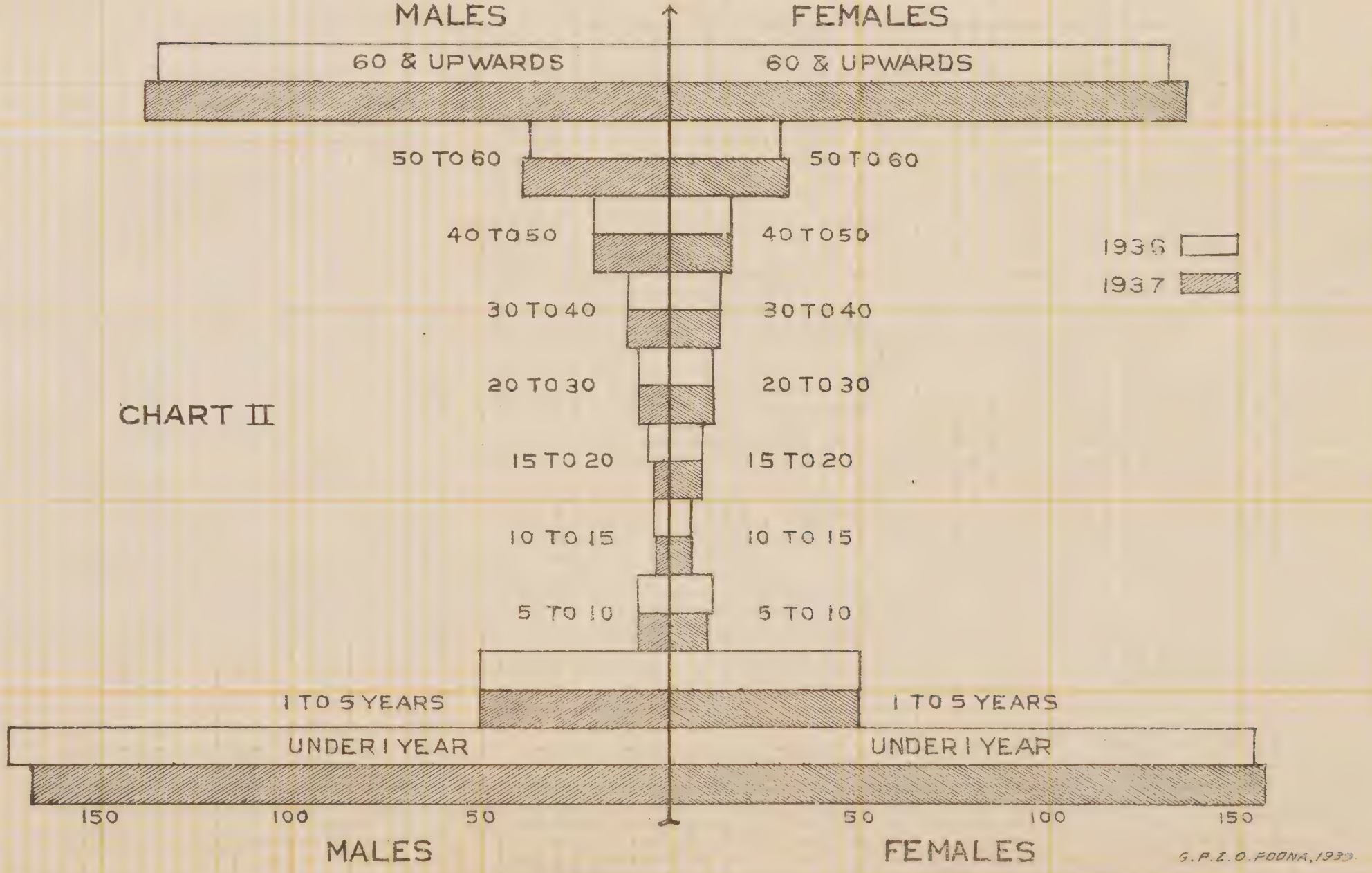


CHART II

G.P.Z.O. POONA, 1938.

Kanara District, which in the case of latter was 5·38 during 1936. The percentage in Bombay city was 6·65 against 6·78 in the previous year. Distribution by classes and sex and Collectorates is shown in Annual Form No. I-A.

17. *Verification of Vital Statistics.*—The Officers of the Public Health Department detected 1,417 births and 165 deaths in the Southern Registration District, 986 births and 35 deaths in the Northern Registration District and 552 births and 8 deaths in the Central Registration District which had not been registered. Many of these omissions were detected in the urban circles. The figures are indicative of the faulty registration of Vital Statistics in urban as well as rural areas and also point to the apathy of the people and the local bodies in this important matter.

18. *Deaths.*—For the second year in succession a decrease in the registered deaths has been recorded as compared to the previous year. The total number of deaths registered was 493,208 in 1937, 497,278 in 1936, the quinquennial average being 488,643 (Graph No. I). The number of deaths recorded in the previous years is given in the following table :—

Year.	Deaths.	Death-rate.
1901–10 mean	571,143	37·39
1911–20 ,, ...	628,810	39·10
1921–30 ,, ...	458,266	28·81
1931–35 ,, ...	483,720	26·97
1936	497,278	27·73
1937	493,208	27·50

19. *Death-rate compared with those of other Provinces.*—The recorded death-rate for the Province works out to 27·50 ; it was 27·73, in the year 1936. The death-rates in the Provinces of India show an increase in Madras, Bengal, Assam, Burma, Bihar, Orissa, North-West Frontier Province, and Sind while there is a decline in the Punjab, Central Provinces, United Provinces and Bombay as may be seen in the table below :—

	1936.	*1937.*
Madras	23·30	23·99
Bengal	24·50	24·70
Assam	19·63	22·21
Burma	21·84	24·76
Bihar	21·68	22·53
Orissa	27·84	28·63
Punjab	23·97	23·71
Central Provinces	34·89	32·63
United Provinces	22·61	21·38
North-West Frontier Province ..	17·92	21·27
Sind	12·49	19·09
Bombay	27·73	27·50

20. *Death-rates in Collectorates.*—In the Province eight districts and Bombay City recorded an increase over the last year's rates in the following order :—West Khandesh (8·58), East Khandesh (8·28), Panch Mahals (3·71), Ahmedabad (1·84), Ratnagiri (1·03), Bombay City (·74), Satara (·70), Bombay Suburban (·62) and Nasik (·47). The remaining 12 districts showed a decrease from the last year's death-rates :—Bijapur (6·52), Ahmednagar (3·06), Kanara (2·98), Thana (2·76), Dharwar (2·72), Sholapur (2·13), Poona (2·08), Belgaum (1·84), Surat (1·39), Broach (·47), Kolaba (·44) and Kaira (·33).

Marked deviations from the mean of the previous five years' rates are shown by West Khandesh (7·44), Ahmedabad (4·44), Panch Mahals (4·32), Bombay Suburban (2·74) and East Khandesh (2·65) which have recorded the increase shown against them, while Bijapur (10·17), Dharwar (5·66), Belgaum (5·23) and Sholapur (2·21) show a decline over the mean of the previous five years. In Kanara District also there is a decrease of ·27 in the death-rate as compared to the quinquennial mean and a decrease of 2·98 as compared to the previous year.

The increase in West Khandesh is due to 3,736 deaths from cholera ; in East Khandesh the increase was due to 1,036 deaths from cholera and more deaths from fevers and respiratory diseases ; it was due to fevers in Ahmedabad, to fevers and all other causes in Ratnagiri and to fevers, respiratory diseases and dysentery in Satara District. In Bombay City there were 681 more deaths from respiratory diseases than in 1936. The decrease in Bijapur, Ahmednagar, Sholapur and Poona is all the more noticeable on account of the scarcity which prevailed in these districts during the year.

The death-rates for rural and urban areas for the Province during the year under report were 27·22 and 28·67 per mille respectively against 27·55 and 28·44 in 1937.

21. *Death-rates in rural areas.*—Of the one hundred and eighty three talukas and petas in the Province no taluka recorded a death-rate above 50 per mille of population. Four, i.e. Viramgaum, Sakri, Mulshi and Mundgod returned death-rates between 40 and 50 per mille, eighteen, death-rates between 35 and 40 per mille, thirty-seven, between 30 and 35 per mille, one hundred and twelve between 20 and 30 per mille and the remaining twelve returned death-rates below 20 per mille. There is a good deal of improvement in the group between 30 and 35 as compared with the preceding year. The highest rate (47·05) was reported in Sakri Taluka of West Khandesh District which was due to higher incidence of Cholera and Fevers in the taluka during the year and the lowest (14·76) in Umbergaon Peta in Thana District.

22. *Death-rates in urban areas.*—Out of the eighty-five urban registration circles in the Province no area reported a death-rate over 50 per mille of population, seven returned death-rates between 40 and 50 per mille

15 between 30 and 40 per mille, 34 between 20 and 30 per mille and the remaining 29 returned death-rates below 20 per mille. There is a decrease in areas reporting death-rates between 30 and 40 per mille as compared with 1936. Death-rates varied from 48·13 per mille for Pandharpur town and 46·47 per mille for Ahmedabad town to 8·30 per mille for Uran and 10·56 for Honavar town. The high death-rate of Pandharpur is due to Respiratory Diseases including Pneumonia and Fevers including Malaria. In Ahmedabad town the high death-rate is to be attributed to Fevers and Respiratory Diseases including Phthisis. The death-rates in towns of Gujarat continue to be higher mainly on account of higher incidence of Fevers and Respiratory diseases. The lowest death-rates are again claimed by Honavar and Uran Ports. The towns on coast line in general continue to remain healthy. The deaths recorded in Bombay city were 30,575 or 846 more than in the previous year, the ratio being 26·33 per mille or an increase of ·74.

23. *Death-rates in Cantonments.*—The lowest death-rate (7·06) was recorded in Belgaum Cantonment and the highest 27·86 in Kirkee. The death-rates recorded in other Cantonments were Ahmednagar 18·85, Ahmedabad 17·66, Deolali 11·78 and Poona 16·66 per mille of the population. As compared to the preceding year there was an increase in the death-rates recorded in Deolali (2·13), Poona (·91) and Ahmednagar (·10) Cantonments and a decrease in Belgaum (1·33), Kirkee (1·71) and Ahmedabad (·40) Cantonments as shown against each.

24. *Excess of births over deaths.*—During the year under report the number of births recorded was 729,476. Out of these 601,723 were in rural areas while 127,753 were in urban areas. Total number of deaths recorded in the Province was 493,208 of which 391,182 were in rural areas while 102,026 were in urban areas. The excess of births over deaths was 236,268 against 245,053 in 1936. The percentage rate of increase in the population was 1·32.

25. *Deaths according to sex.*—During the year under report the deaths of 252,925 males and 240,283 females were recorded giving death-rates of 27·24 per mille and 27·79 per mille respectively against 27·56 and 27·91 per mille in 1936. The Provincial ratio of male to female deaths among the total deaths was 105·26 to 100 as compared with 106·06 to 100 in 1936. In Bombay city the figure was 115·59 as compared with 118·57 in 1936.

26. Deaths by castes or classes and by sex are recorded in Annual Form No. V, Appendix III.

27. *Deaths according to causes compared with previous years.*—The following table shows the number of deaths in 1937 and the ratios per 1,000 of population arranged according to causes and contrasted

with the figures for 1936 and with the average for the preceding five years :—

	1936.		1937.		Mean for five years.	
	Number.	Ratio.	Number.	Ratio.	Number.	Ratio.
Cholera	11,304	·63	10,992	·61	8,599	·48
Small-pox	4,320	·24	1,810	·11	6,168	·34
Plague	578	·03	506	·03	11,069	·62
Fevers	161,150	8·99	164,130	9·15	164,554	9·18
Dysentery and Diarrhœa.	30,104	1·68	28,094	1·56	24,910	1·39
Respiratory Diseases ..	111,113	6·20	111,487	6·22	98,876	5·51
Injuries	7,066	·39	7,065	·39	7,219	·40
Other Causes ..	171,643	9·57	169,124	9·43	167,248	9·33
All Causes	497,278	27·73	493,208	27·50	488,643	27·25

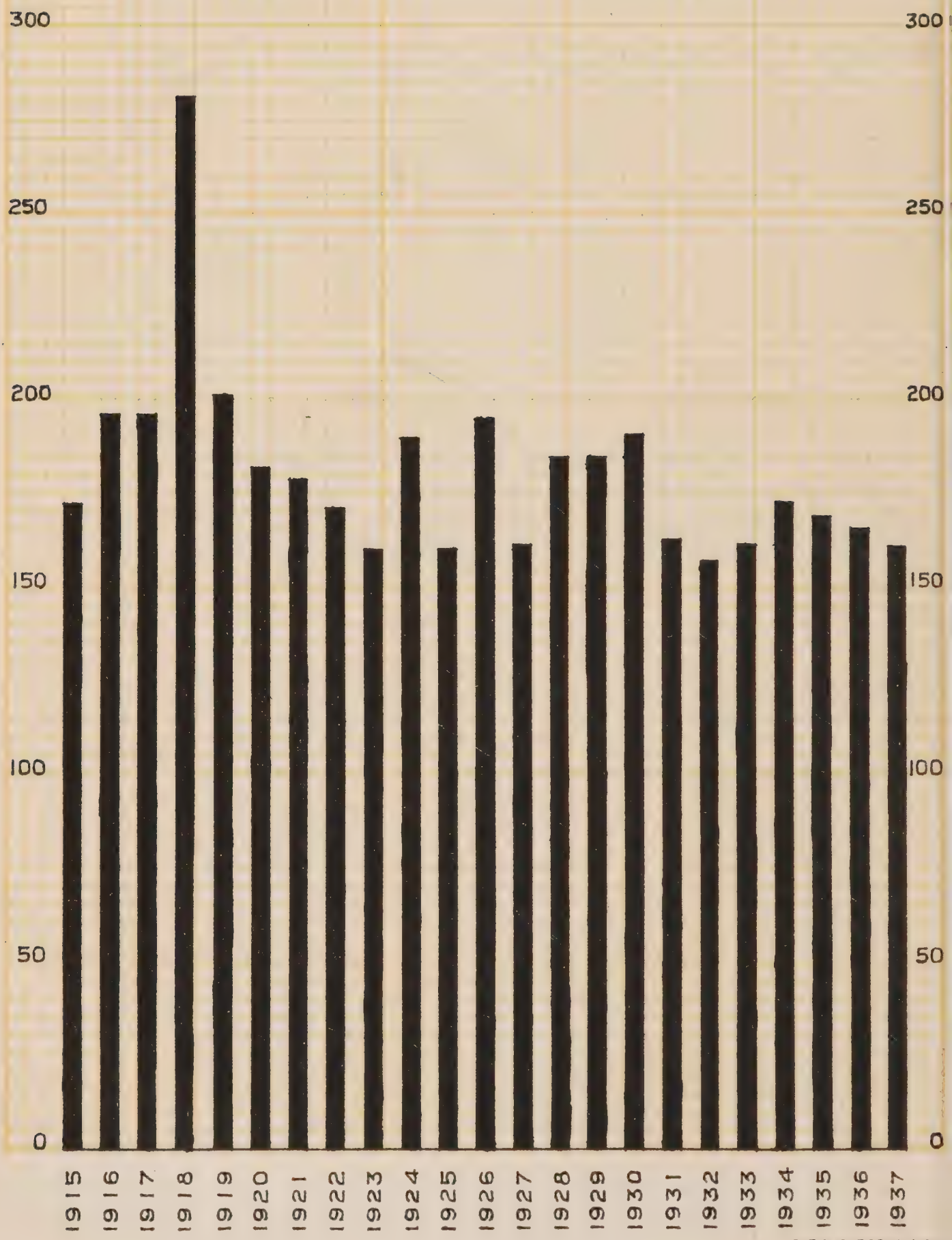
Graphs showing the incidence of deaths under the chief causes for the year under report compared with the previous years are shown in Charts I and IV. Graphs showing the annual incidence of deaths under the chief epidemic diseases, cholera, small-pox and plague are shown in Chart VII.

Infant Mortality.

28. There were 117,258 deaths under one year giving a ratio of 160·74 per 1,000 registered births as against 123,289 or a ratio of 166·08 in 1936. The male and female ratios were 168·02 and 152·98 respectively as against 175·96 and 155·61 in 1936. The excess of male infant deaths over female infant deaths is seen in almost all the localities. Of the infants who died, 45,315 i.e. 39 per cent. of the total infant mortality, died before they were one month old ; 25,788 of these i.e. 22 per cent. of the total infant deaths were under one week and 19,527 i.e. 17 per cent. over one week. In all districts, with the exception of Panch Mahals, Ahmedabad and Bijapur, the infant mortality under one week was higher than over one week and the divergence of the three districts is probably due to many deaths of newly born infants being not reported. Of the remaining 39,397 i.e. 34 per cent. were over one month and under six months and 32,546 i.e. 27 per cent. were between six and twelve months old. In 1936 the percentages in the age groups of under one month, between one and six months and six and twelve months were 38, 37 and 25 respectively.

CHART III

CHART SHOWING INFANT MORTALITY RATE, IN THE BOMBAY PROVINCE, FROM 1915 TO 1937.



G.P.Z.O. POONA, 1939.

29. *Infant mortality in the Provinces.*—In the Provinces of India the infant death-rates were as under :—

(Infant deaths per 1,000 registered births.)

——	1936.	1937.	——	1936.	1937.
Madras ..	164·04	169·70	Punjab ..	158·44	163·04
Bengal ..	170·9	176·2	United Provinces.	148·53	142·33
Assam ..	150·82	160·04	Central Provinces.	234·98	218·60
Burma ..	195·34	203·04	North West Frontier Province.	121·72	148·61
Bihar ..	117·98	115·86	Sind ..	121·31	118·02
Orissa ..	198·87	214·66	Bombay ..	166·08	160·74

From the above table it will be seen that the Central Provinces recorded the highest infant death-rate per 1,000 registered births and Bihar the lowest. There was a decrease in the infant death-rates over those of the previous year in the Provinces of Bihar, United Provinces, Central Provinces, Sind and Bombay while the other Provinces recorded a rise.

30. *Infant mortality in urban and rural areas.*—The urban and rural infant death-rates per 1,000 registered births for the Province were 217·13 and 148·77 respectively as compared with 224·19 and 153·75 in the previous year. Infant mortality in 1937 compared with previous years is shown in the table below :—

Year.	Deaths under 12 months.			Births registered.			Infant death-rate per 1,000 births.			Infant deaths per 100 of total deaths.
	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	
1937 ..	63,248	54,010	117,258	376,426	353,050	729,476	168·02	152·98	160·74	23·77
1936 ..	67,226	56,063	123,289	382,054	360,277	742,331	175·96	155·61	166·08	24·79
1935 ..	66,506	56,798	123,304	375,446	352,700	728,146	177·13	161·08	169·33	24·10
1934 ..	65,951	55,924	121,875	362,559	342,233	704,792	181·90	163·41	172·92	24·09

Year.	Deaths under 12 months.			Births registered.			Infant death-rate per 1,000 births.			Infant deaths per 100 of total deaths.
	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	
1933 ..	63,251	53,197	116,448	368,588	347,356	715,944	171·60	153·15	162·65	23·94
1932 ..	60,253	50,269	110,522	363,515	341,426	704,941	165·75	147·23	156·78	24·93
1931 ..	64,263	53,023	117,286	360,300	338,010	698,310	185·49	156·87	167·96	24·81
1930 ..	66,833	56,983	123,816	333,831	313,853	647,686	200·20	181·56	191·48	24·41
1929 ..	65,904	55,912	121,816	335,987	317,395	653,382	196·15	176·47	186·44	24·40
1928 ..	65,200	55,158	120,358	335,191	316,134	651,325	194·52	174·48	185·79	25·69
1927 ..	55,256	47,084	102,340	325,078	306,014	631,092	169·98	153·86	162·16	23·21
1926 ..	67,248	56,295	123,543	324,518	306,368	630,886	207·22	183·75	195·82	25·51
1925 ..	51,603	43,969	95,372	308,720	288,552	597,272	167·15	152·38	160·02	24·00
1924 ..	62,805	53,302	116,107	314,265	296,149	610,414	199·85	179·98	191·84	22·61
1923 ..	53,288	44,702	97,990	314,379	295,167	609,546	169·50	151·45	160·76	21·63
1922 ..	51,510	43,117	94,627	286,515	267,541	554,056	179·78	161·12	170·79	22·99
1921 ..	53,967	45,646	99,613	284,515	265,464	549,979	189·68	203·29	181·12	22·28
1920 ..	52,623	44,159	96,782	272,574	254,860	527,434	193·06	173·27	183·49	19·20
1919 ..	52,647	45,813	98,460	252,038	235,208	487,296	208·93	194·78	202·05	17·53
1918 ..	84,293	74,332	158,625	291,331	272,720	564,051	289·34	272·56	281·22	10·99
1917 ..	65,330	57,567	122,897	322,294	303,993	626,287	202·70	189·37	196·23	17·96
1916 ..	65,764	56,721	122,485	319,742	303,769	623,511	205·67	186·72	196·44	21·45
1915 ..	60,249	51,322	111,571	331,439	313,685	645,124	181·78	163·61	172·95	24·88

Among the towns the following recorded the very high infantile death-rates:—Pandharpur (426·77), Viramgaum (360·54), Poona City (344·40), Dakore (317·31), Nadiad (306·55) and Poona Suburban (303·75). The highest rural infantile death-rate was recorded in Kanara (191·36) and the lowest in Ratnagiri (90·84) which is slightly higher than the infant mortality rate of 87·3 among the Europeans, but lower than the rate of 115·2 of the Anglo-Indians.

Detailed figures are given in Annual Form No. VI (*a*).

The scheme of rural medical relief sanctioned by Government in 1936 contains special provision for increased number of qualified nurses and midwives in the districts. Provision has been made for appointment of

four additional nurses or midwives in each of the 19 districts in the province except the Bombay Suburban District. In respect of the 76 additional nurses and midwives to be appointed under the scheme at the rate of four for each district Government have decided to pay a grant equal to four-fifth of the cost of the establishment and the remaining one-fifth share will have to be borne by the District Local Boards concerned. The nurses and midwives employed under the scheme may either be attached to the District Local Board dispensaries or allowed to settle and work in a group of villages like the subsidised medical practitioners, as the District Local Board may desire, subject to the approval of the Surgeon General.

31. As regards measures taken to reduce infant mortality, the Assistant Director of Public Health, Southern Registration District, Belgaum, writes :—

"Thirty midwives were entertained by 23 different Municipalities during the year. Of these two in Satara and one in Karwar town were temporary. The Municipalities of Athani, Bail-Hongal, Kumta and Karmala appointed one midwife each from 2nd July 1937, 24th May 1937, 1st November 1937 and 4th March 1937 respectively. One midwife in the service of the Red Cross Society, Dharwar, was attached to Nargund Municipality ; 1,476 confinements were attended by them. Advice was given to prospective mothers about maintaining their health during pregnancy and importance of medical aid and general cleanliness, etc.

The Lady Health Visitor in charge of the Infant Welfare Centre, Belgaum, was in service up to 15th July 1937 and the place was vacant up to 27th December 1937. The number of visits and re-visits of infants to the centre was 53 and 9 and those of toddlers 5,205 and 12,344, respectively.

Fifty-three classes were held for giving instructions to the local practising dais, the total attendance was 153. As an inducement, two annas were paid to each dai for every attendance. Twenty-eight home nursing classes and 31 sewing classes were arranged and were attended by 247 and 367 women respectively.

Dharwar Red Cross Committee entertained ten midwives and one Ayah and they were attached to different taluka dispensaries. 657 normal and 120 abnormal cases were attended by them during the year.

The Maternity and Child Welfare Centre at Bijapur was visited by 167 new and 274 old infants and toddlers. Milk, canji, etc., were given to infants of the poor visiting the centre. 117 garments were also given free. 649 expectant mothers attended the centre. The staff conducted 96 labour cases in the maternity homes and 38 in the patients' houses. There were 325 expectant mothers for the clinic. 55 mothers attended the sewing class held by the centre.

In Sholapur city 25 midwives attached to different institutions attended 2,712 confinements at the Institutions and 117 outside. Antenatal and post-natal advice was given to mothers regarding their

health, diet, etc. The Village Improvement Committee, Sholapur, organised a Health Week in a number of villages during Navaratri Holidays and village sites, houses, streets, gutters, etc., were cleaned. Magic lantern lectures on health subjects were delivered during the tour of the Publicity Van in Sholapur District.

In Satara town Baby and Health Week was celebrated from 25th to 30th October 1937. The civic duties of the citizens in connection with Public Health were explained and lectures were also delivered by a Municipal Councillor on different health subjects. In Satara District Maternity wards have been arranged under the direction of trained nurses at some places in co-operation of the Satara Health Association.

During Health Exhibition celebrated in Karwar, magic lantern slides explaining salient points regarding pregnancy, ante-natal care, care during labour of mothers and infants and regarding post-natal care, were shown."

The Assistant Director of Public Health, Northern Registration District, Ahmedabad, reports :—

"In Bulsar town leaflets explaining the advantages of maternity homes were distributed. The Infant Welfare Committee formed in 1935 is still functioning satisfactorily.

In Broach town the ante-natal clinic, infant welfare centre and the maternity home attached to the Bai Aminabai Killedar Dispensary were continued. Besides there are four maternity homes in the city, two of which are conducted by Mission authorities.

Godhra Municipality engaged a midwife from November 1936 who attended 81 labour cases. In Dholka town a nurse has been attached to the Municipal Dispensary from 10th August 1937.

In Bhusaval town arrangements have been made for training dais at the Infant Welfare and Maternity Centre. In Jalgaon, the municipal midwife carried on her rounds in the town and attended to delivery cases. In Amalner, similar services were rendered by the midwife engaged by the Silver Jubilee Maternity Hospital.

The Ahmedabad Municipality has engaged ten midwives under a lady doctor to attend to labour cases free of charge. 1,745 deliveries were conducted by them during the year. The lady doctor conducted 37 abnormal deliveries. 96 cases were attended at the Municipal Saraspur Maternity Home opened in 1936."

The Assistant Director of Public Health, Central Registration District, Poona, reports :—

"There are 16 child welfare centres in eleven towns and one in Tarapur, a rural area. Of these fourteen are affiliated to the Bombay Mofussil Maternity, Child Welfare and Health Council and are inspected by the Honorary Adviser of the Council. There are twelve maternity hospitals or homes in different towns in the Division. In two towns there are maternity wards attached to general hospitals, each of the ward having about six beds."

The value of maternal and infant welfare work as a measure of saving this unnecessary waste of life is being appreciated by the people and maternity homes and infant welfare centres are springing up in small towns and even villages and as this appreciation increases, our appeal to the public and the authorities for the means to satisfy this popular demand will have to be more insistent.

Other activities regarding Maternity and Child Welfare are given separately under Sanitary Associations and Health and Baby Week in Chapters IX and XI.

The following is a brief extract from the section that deals with infant mortality in the Annual Report of the Executive Health Officer, Bombay Municipality :—

Bombay City.—The deaths among infants under one year of age numbered 8,688 being 258 less than in the preceding year and 1,015 more than the annual average in the decennium 1927–1936.

The infant mortality rate expressed as the number of deaths in infants per 1,000 registered births was 245·0 including Europeans and Anglo-Indians for the year 1937. The lowest rate was 218 registered in 1932.

Of the 8,688 infants who died within one year of their birth, 6,860 or 78·7 per cent. were born in Bombay City and 1,828 or 21·3 per cent. in the mofussil. The births of these 1,828 infants were thus not registered in the City register. If, therefore, the figure, 1,828 be excluded from the total number of infants who died in the City during the year, the rate of infant deaths per 1,000 births registered would be 193 instead of the official figure 245·0 as shown above.

Causes of death.—It will be seen that 6,671 or nearly 76·8 per cent. of the total deaths in infants were due to diseases of the Respiratory System, Infantile Debility and Premature Birth, against 6,825 deaths or 76·3 per cent. in 1936. Diarrhoea and Enteritis caused 558 deaths, Malaria, Ague and Remittent Fever and Fever not defined 130 deaths and Convulsions 560 deaths. The deaths from Small-pox and Measles numbered 165 and 54 respectively.

Of the total deaths among infants, 1,850 or 21·4 per cent. took place in the first week of life and 1,354 or 15·6 per cent. in the age period of 1 to 4 weeks.

The mortality among infants who had not completed the first month of life was thus 3,204 or 37·0 per cent. of the total infant deaths. The number of deaths in the groups 4 weeks or 6 months and 6 to 12 months was 2,371 and 3,113 being respectively 7·2 and 35·8 per cent.

Infantile Mortality by Races.—Infant mortality among the principal castes was Hindus, other castes 254 per 1,000 registered births, Hindus low caste 303, Mussalmans 209, Parsees 106, Jews 116, Indian Christians 215, Anglo-Indians 126, Europeans 57 and Buddhists 311.

Prevention of Infantile Mortality.—The work which is being done in Bombay for the reduction of infant mortality may be described under the following heads :—

(*i*) Visits by the Municipal District Nurses for the purpose of getting into touch with prospective mothers and for discovering cases of sickness especially among women and children and unvaccinated children ; for enquiry into the condition of new born infants ; and for giving instructions by homely talks as to the care and rearing of children.

(*ii*) Attendance on confinements.

(*iii*) Provision of necessaries and comforts during the lying-in period.

(*iv*) Maternity Homes.

(*v*) Infant Welfare Centres and Infant Milk Depots.

Municipal Maternity Homes.—There are now five Maternity Homes maintained by the Municipality.

The total number of women admitted during the year was 5,323 as against 5,200 in 1936. The number of cases confined in the Homes was 4,771 as against 5,493 in 1936. Of the women confined 883 were primiparae.

It is interesting to note that out of 37,795 births (including 2,340 still-births) registered in the City in 1937, 27,758 or 73·4 per cent. took place in Maternity Homes, as against 70·9 per cent. in 1936.

Rombay Presidency Infant Welfare Society.—This Society has been doing good work. At the end of the year there were 7 centres, three Maternity Homes and one Creche at DeLisle Road. Each centre is in charge of a Lady Doctor (full-time), graduate of the Bombay University, under whom there is a Supervisor and a Health Visitor ; the former is a fully qualified, diplomaed nurse and the latter is a qualified Health Visitor.

The Supervisor looks to the distribution of milk and assists the Lady Doctor at the Clinics and in advising mothers on infant management. The Health Visitor visits her district and persuades the expectant mothers to take advantage of the Maternity Home in the City and to bring their babies to Infant Welfare Centre for milk and treatment.

32. *Summary of Vital Statistics of Chief Towns.*—The Birth and Death returns of the chief cities may be briefly noted as follows :—

Bombay.—Population, 1931 census—1,161,383. The registered births numbered 35,174 equal to a birth-rate of 30·29 as compared with 35,604 and 30·65 respectively in the previous year. The registered deaths numbered 30,575 as against 29,729 in 1936. The death-rate per mille of population was 26·33 against 25·59 in 1936. The number of infant deaths exclusive of Europeans and Anglo-Indians was 8,662 equal to a ratio of 246·26 as compared with 8,907 and 250·17 in 1936 respectively. The chief causes of deaths shown in

the returns were Respiratory Diseases and all other causes. Pneumonia and Phthisis accounted for 9,154 and 2,025 deaths respectively. Cholera caused only four deaths, Small-pox 687 deaths while Influenza was responsible for 65 deaths as against 70 deaths, and Cerebro-spinal fever 154 deaths against 228 in 1936. Plague was totally absent.

Ahmedabad.—Population, 1931 census—310,000. As the actual enumeration of the census was faulty this figure was estimated by the Census Commissioner. The number of births registered was 17,535 equal to a birth-rate of 56·56 as against 17,345 and 55·95 respectively in 1936. The registered deaths were 14,408 corresponding to a death-rate of 46·47 as compared with 15,016 and 48·44 respectively in 1936. The number of infant deaths was 4,913 equal to a ratio 280·18 per 1,000 registered births as against a ratio of 303·38 in the previous year. The chief causes of deaths shown in the returns were all other causes, Respiratory Diseases and Fevers. Cholera and Plague were absent. Small-pox recorded 61 deaths and Cerebro-spinal fever claimed 57 deaths during the year against 96 in 1936. The incidence of Cerebro-spinal fever is gradually declining in the town. The disease during the year was not confined to any particular locality. It began to rise from February recording the highest number of cases and deaths during April, viz., 23 and 12 respectively. After April there were only sporadic cases. As regards other diseases, Enteric fever caused 57 deaths, Measles 29, Malaria 185, Diphtheria 12, Influenza 2, Chicken-pox 2, Whooping cough 66, Cancer 47, Pneumonia 604, Phthisis 1,198, Dysentery 387 and Diarrhoea 441 deaths.

Poona.—Population, 1931 census—162,901. The total number of births registered was 5,299 equal to a birth-rate of 32·52 as against 6,484 and 39·80 respectively in 1936. The registered deaths were 6,461 corresponding to a death-rate of 39·66 as compared with 6,220 and 38·18 respectively in the previous year. All other causes, fevers and respiratory diseases were the main heads under which majority of deaths were registered. The infant deaths numbered 1,825 giving a ratio of 344·40 per 1,000 registered births. In Poona town the number of deaths is higher than the number of births, the difference between the two is 1,162. Though the death-rate is evidently influenced by the high infant mortality rate the disparity between birth-rate and death-rate has to be attributed to the faulty registration of births. The town was practically free from epidemic diseases except for two cholera deaths reported during the year. Influenza caused four deaths, Cerebro-spinal fever one, Pneumonia 1,061, Phthisis 580, Enteric fever 113, Measles 189, Malaria 592, Diphtheria 3, Dysentery 65 and Diarrhoea 415 deaths.

Surat.—Population, 1931 census—98,936. The population figure is evidently wrong and the Municipality has subsequently taken fresh census and enumerated the figure as 151,202. The ratios given in this report are however calculated on the old census population as

detailed information regarding the subsequent census was not available. The number of births registered were 6,129 giving a ratio of 61·95 per mille of population. The total number of deaths and the death-rate were 4,847 and 48·99 respectively. All other causes, Fevers and Respiratory Diseases accounted for a large number of deaths. Cholera and Plague were absent. Small-pox claimed 7 deaths, Enteric fever 93 deaths, Measles 42, Malaria 212, Leprosy 5, Cancer 24, Pneumonia 726, Phthisis 317, Dysentery 133 and Diarrhoea 338 deaths. The number of infant deaths was 1,668 or a ratio of 272·14 for 1,000 registered births as against a ratio of 308·07 in 1936.

Sholapur.—Population, 1931 census—144,654. The number of births registered during the year was 6,980 equal to a birth-rate of 48·25 as compared with 7,042 and 48·68 respectively in 1936. The chief causes of deaths shown in the returns were Respiratory Diseases, which account for nearly half the deaths, all other causes, Fevers and Dysentery and Diarrhoea. Cholera caused 24 deaths during the year, Small-pox 10 deaths and Plague only one death. Pneumonia claimed 1,105 deaths, Phthisis 579 deaths, Enteric fever 90, Measles 217, Malaria 37, Influenza 2, Cerebro-spinal fever 1, Dysentery 106 and Diarrhoea 362 deaths. The infant mortality rate recorded a fall from 205·48 to 198·42. The total death-rate was 33·95 against 32·32 in 1936.

The Executive Health Officer, Bombay, and the Medical Officers of Health of the above cities issue an annual report on the health of the cities in which the vital statistics and activities of the Municipal Health Department are fully described.

CHAPTER III.

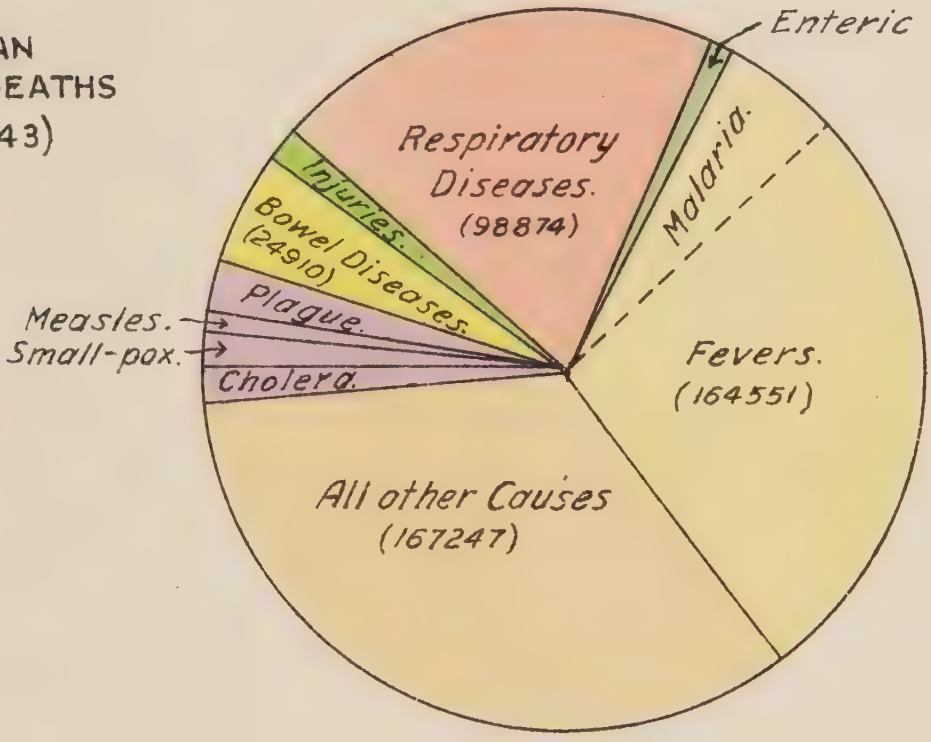
The State of Public Health in the Province and History of Chief Diseases.

33. *General remarks on the Health of the Province.*—There was slight decrease in the death-rate of the Province (27·50) as compared with the figure for 1936 (27·73). The quinquennial average was 27·25. The ratios are calculated on the census figures of 1931, but as the population has since increased, the ratio of deaths during the year calculated on the estimated population comes to 25·44. As compared with the preceding three years there is a noticeable decline in the Provincial death-rate ; however, it has not reached the low level of the healthy year 1932 when the rate recorded was 24·72. The comparison of these two years, 1932 and 1937, shows that during the former year though plague was much more prevalent, the other epidemic diseases, viz., cholera and small-pox claimed fewer deaths. As regards Fever, Dysentery and Diarrhoea, Respiratory Diseases and all other causes, the year 1932 is to be considered more healthy as compared with 1937. The deaths registered under these heads during 1937 have been individually discussed in the following pages of this Chapter.

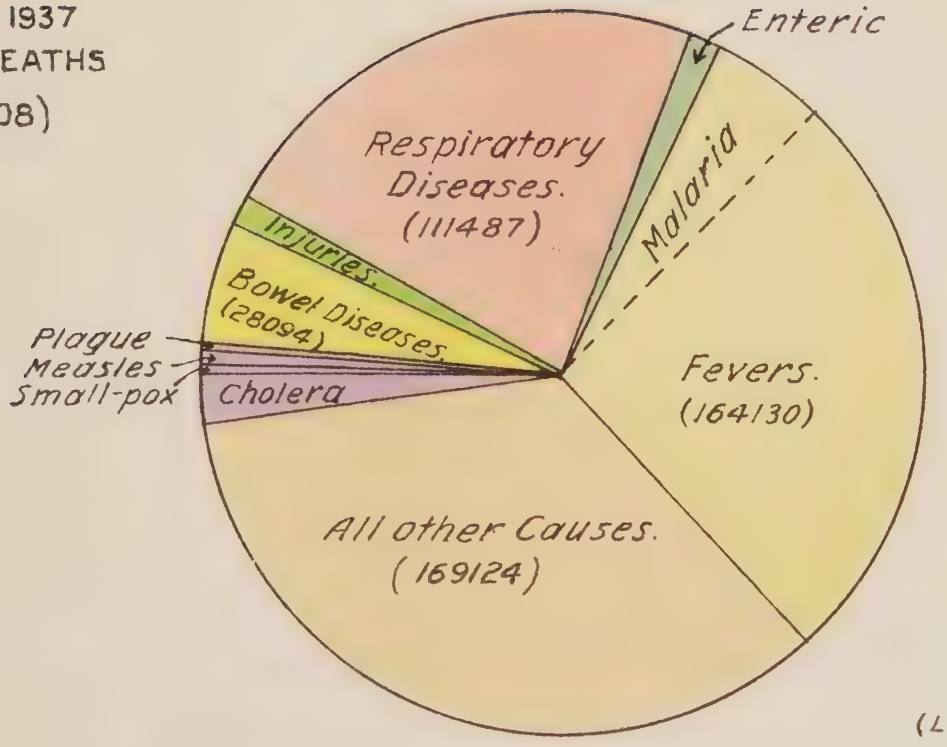
CHART IV.

COMPARATIVE DIAGRAMS OF DEATHS BY CAUSES FOR MEAN 1932-1936 AND FOR 1937.

MEAN
TOTAL DEATHS
(488643)



YEAR 1937
TOTAL DEATHS
(493208)



(L.) G.P.Z.O. POONA, 1939.

Turning to the comparison of the year under report to the preceding year, a decline in all the epidemic diseases is noteworthy. Cholera claimed 10,992 deaths against 11,304 in 1936, Small-pox had only 1,810 deaths against 4,320 in the peceding year. The progressive decline in Plague noticed during the last three years continues though not with the same speed as in 1935 compared with 1934, and 1936 compared with 1935. However the figure of 506 plague deaths recorded during the year is again the lowest record since the appearance of the disease in this Province (1896). Among the remaining heads Dysentery and Diarrhoea recorded a fall of 2,011 deaths, and other causes of 2,519 deaths. A rise was recorded in Fevers of 2,980 deaths and Respiratory Diseases of 374 deaths. Deaths from Injuries were almost the same, viz., 7,065 against 7,066 in 1936.

The rates based on estimated population also show an improvement in the death-rates. During 1937 the death-rate calculated on estimated population is 25·44 against 25·96 in 1936. As regards birth-rate there is a decline of 1·14 over the preceding year.

A comparison of the figures of deaths under several heads with the mean of the previous five years 1932 to 1936 shows that there was a decrease in the mortality rates under Small-pox, Plague, Fevers and Injuries. Small-pox showed a decrease from ·34 to ·11, Plague from ·62 to ·03, Fevers from 9·18 to 9·15 and Injuries from ·40 to ·39. Cholera recorded a rise of ·13, Dysentery and Diarrhoea of ·17, Respiratory Diseases of ·71 and other causes of ·10.

Other features of the year were (*a*) an excess of births over deaths of 236,268, (*b*) decrease in the infant mortality rate from 166·08 to 160·74 and (*c*) decrease in the infant deaths per 100 of total deaths from 24·79 to 23·77.

The death-rate of Dysentery and Diarrhoea is to some extent influenced by the prevalence of cholera in the Province. In sympathy with the cholera deaths the rate under Dysentery and Diarrhoea has also fallen this year as compared to 1936. But as compared to the mean of the previous five years, the cholera deaths during the year 1937 being more, the Dysentery and Diarrhoea rate also has remained higher. The village officers have learnt to diagnose cholera with a fair amount of accuracy but in recent years their tendency is to report cases of diarrhoea as cholera especially in the beginning of cholera season.

The three omnibus headings, i.e., " Fevers ", " Respiratory Diseases " and " Other Causes " have accounted for 90 per cent. of the total mortality in the Province. The disquieting factor which was mentioned in the report of 1936 is the increase of deaths due to Respiratory Diseases ; the year under report shows a rise as compared both to the previous year and the mean of the previous five years. Though all the deaths may not be correctly registered under this head there is sufficient reason to believe that the figure is being greatly influenced by

the spread of Tuberculosis both in urban and rural areas. The deaths due to this latter cause are also steadily increasing, during recent years, this year's figures being 25,123 deaths against 24,592 in 1936. It is strange but true that the disease causing twice as much mortality as cholera is not taken by the people half so seriously. The facilities of rapid transport between the large towns and the villages are responsible to some extent for this spread. Tuberculosis was most prevalent in Thana, Kolaba and Ratnagiri Districts from which the bulk of the labour for Bombay City used to be drawn, but now it is not uncommon to come across cases of tuberculosis of Bombay origin in the villages of the distant districts where it goes under the name of " Bombay Fever ".

If the question " why is the health of the Province so poor " has to be answered in one sentence, the reply would be " the standard of living of the masses is very low." A glance at the diagram showing the causes of death on the previous page would show that the epidemics occupy only a small part of the circle and " respiratory diseases " and " fevers " occupy more than half of the circle. In other words, the causes of death are more constitutional than accidental. With the higher standard of living comes the desire for clean habits and comfortable house and surroudings, the responsibility of bringing up and educating children and above all the need to keep oneself fit.

Details of various diseases as compared with previous year and also with the quinquennial average are given under separate headings in paragraph 27 and further comparison is shown in graphic form in the charts inserted in the Report.

Fevers (General prevalence).

34. The number of deaths registered as due to fevers during the year 1937 was 164,130 against 161,150 in 1936 and 164,554, the mean of the previous five years. The death-rate was 9·15 against 8·99 in 1936. The urban death-rate was 5·51 and the rural 10·05 against 5·49 and 9·87 respectively in the previous year.

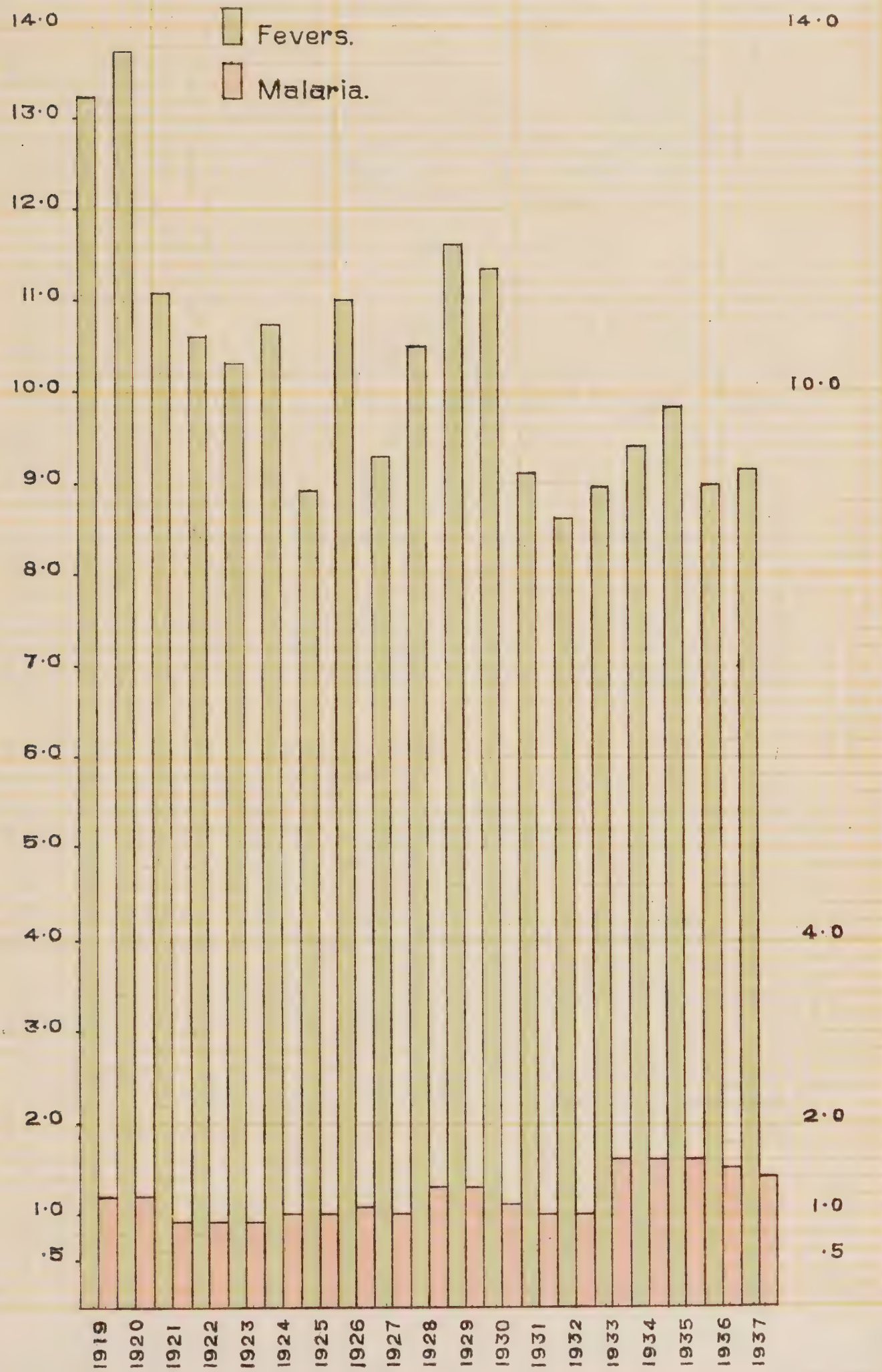
35. *Fever mortality in previous years.*—The mortality recorded under this heading in previous years is given below :—

Year.	Fever Deaths.	Ratio per mille.
1901–10 mean	202,801	13·28
1911–20 ,, ...	283,954	17·66
1921–30 ,, ...	169,218	10·64
1931–35 ,, ...	165,133	9·22
1936	161,150	8·99
1937	164,130	9·15

Distribution of fever deaths is shown in Annual Form No. IX.

CHART V

CHART SHOWING MORTALITY RATE FROM FEVERS & MALARIA BY YEARS FROM 1919 TO 1937.



G.P.Z.O, POONA, 1939.

36. *Death-rates from fevers in Collectorates.*—High death-rates were recorded in the following Collectorates :—Ahmedabad (16·99), Panch Mahals (16·75), East Khandesh (16·49), Broach (16·01), West Khandesh (12·76) and Kaira (10·36).

37. *Death-rates from fevers in urban and rural areas.*—High death-rates were recorded in the Province in the following towns :—Viramgaum (23·78), Ankleshwar (22·43), Borsad (21·46), Nadiad (19·34), Dholka (18·92), Umreth (18·47), Mehmedabad (18·13) and Kapadvanj (17·45). In rural areas high death-rates were recorded in the talukas of Viramgaum (28·48), Sanand (27·22), Prantij (26·75), Modasa (21·78), Edlabad (21·57), Mundgod (21·51), Jhalod (21·45) and Dholka (21·23).

Details of deaths from fevers are shown below :—

Malaria.—(*Vide* Chapter VIII).

38. *Enteric fever.*—The number of deaths from fevers registered as due to Enteric was 6,105 against 6,311 in 1936 the ratios being ·34 and ·35 respectively. There is a slight decrease in the recorded deaths under this head as compared to the preceding year.

39. *Deaths from Enteric fever in urban and rural areas.*—The number of deaths recorded from enteric fever in urban areas where the disease was more prevalent is as follows :—Poona 113, Surat 93, Sholapur 90, Ahmedabad 57, Nasik 45, Dharwar 33, Belgaum 30 and Hubli 29. In Bombay city 341 deaths were recorded as compared with 284 in 1936. The number of deaths recorded under this head for the rural areas in the districts where the disease was prevalent is as follows :—West Khandesh 800, Kolaba 645, Dharwar 567, Thana 484, Kanara 384, Nasik 373 and East Khandesh 311.

40. *Measles.*—The number of deaths registered as due to Measles was 3,670 against 3,659 in 1936. The death-rate was the same (·20) as in the preceding year. The urban death-rate was ·37 and the rural ·16 as against ·47 and ·14 respectively in 1936. The incidence was almost the same as in the preceding year.

41. *Deaths from Measles in urban and rural areas.*—High death-rates in urban areas were recorded in Parola (3·83), Pandharpur (2·10), Dakor (1·88), Sholapur (1·50), Yawal (1·49) and Jalgaon (1·43). In Bombay city 211 deaths were recorded as against 146 in 1936 the ratios being ·18 and ·13 respectively.

The number of deaths from Measles in rural areas of the district where the disease was most prevalent is as follows :—East Khandesh 912, Sholapur 277, Satara 243, Poona 123, Dharwar 121 and Belgaum 112.

42. *Relapsing fever.*—Only one death was recorded under this head which occurred in Surat town.

43. *Kala Azar.*—No death due to this cause was recorded during the year.

44. *Typhus.*—No death was reported under this head during the year.

45. *Cerebro-spinal fever.*—There were 227 deaths registered as due to Cerebro-spinal fever during the year the ratio being ·01 per 1,000 of population as against 407 and ·02 respectively in 1936. The largest number of cases were reported from Bombay city viz., 242 attacks and 154 deaths against 353 attacks and 228 deaths in 1936. In Ahmedabad town, which had a severe epidemic of the disease during 1933–34, the infection is still lingering though a gradual decline has been registered in the subsequent years. Ahmedabad contributed 106 cases and 57 deaths during the year as against 170 cases and 96 deaths in 1936. As regards the rest of the Province the cases were only sporadic. Almost all the deaths (225) occurred in the urban areas giving a ratio of ·06 per mille of population against 374 and ·11 respectively in 1936. Only two deaths occurred in the rural areas. As regards the Registration Districts, the bulk of the cases were from the Northern Registration District viz., 116 cases and 63 deaths. The Central Registration District recorded only seven deaths and the Southern Registration District, three deaths.

Deaths from Cerebro-spinal fever in urban and rural areas.—Out of the total of 227 deaths 154 were recorded in Bombay city, the death-rate being ·13 against ·20 in 1936. The disease was present throughout the year. The incidence was high during the first four months of the year. The highest number of deaths (26) occurred in January, and April had 25 deaths on record. The lowest number of cases and deaths occurred during the months of June (8–6) and October (8–5). As regards the age distribution, the majority of deaths (116) occurred among people between the age periods of 15 to 50. Those between the age of 20 to 30 years had 46 deaths, between 30 and 40, had 36 deaths, between 40 and 50, 19 deaths and between 15 and 20, 15 deaths. There were 34 deaths among the persons below the age of 15 years, the majority of which (27) occurred between 2 and 15 years, three each between one and two years, and 6 months and one year, and one between four weeks to six months. There were only 4 deaths among those above 50 years due to this cause. There were 117 deaths among males and 37 among females. The main classes affected were Hindus (101 deaths) and Mahomedans (43 deaths). In Ahmedabad town, 106 cases and 57 deaths were recorded, the death-rate being ·18 against ·31 in 1936. Cases occurred throughout the year. The largest number of attacks (23) was in April and the lowest (one) in November. The communities affected were Hindus (71 cases and 43 deaths), Mahomedans (33 cases and 14 deaths) and Jains (two cases only). Among the persons attacked, there were 84 males and 22 females while among the number of deaths there were 49 males and 8 females. The incidence was not confined to any particular locality. Persons between the age period of 5 to 30

years were found to be more susceptible and 82 cases and 42 deaths occurred between these ages. Among other affected urban areas, Broach and Belgaum had two deaths each and Jambusar, Jalgaon, Bhusawal, Poona, Vengurla, Nasik, Trimbak, Bandra, Kurla and Sholapur had one death each. In rural areas, Kaira and Poona districts only had a solitary death each. The infected houses were cleaned, disinfected and white-washed. In Ahmedabad city, cases from different localities were removed to the Meningitis Wards specially constructed in the compound of the Vadilal Sarabhai Hospital for isolation and treatment. 783 persons were inoculated against Cerebro-spinal fever with anti-meningococcal vaccine prepared by the Haffkine Institute, Bombay.

Respiratory Diseases (General prevalence).

46. During the year under report, the mortality figures under the head Respiratory Diseases showed a small increase, the total deaths recorded being 111,487 (60,169 males and 51,318 females) against 111,113 in 1936 and 98,876 the mean of the previous five years.

The progress of the mortality from Respiratory Diseases in the last few years is shown below :—

Year.	Deaths.	Ratio per mille.
1901–10 mean	56,158	3·68
1911–20 „	79,901	4·78
1921–30 „	86,547	5·43
1931–35 „	94,999	5·29
1936	111,113	6·20
1937	111,487	6·22

The steady rise in the figures is partly to be attributed to the better registration of deaths under the general head and partly to more prevalence of the diseases of Respiratory system especially in crowded urban areas. The urban death-rate (9·41) continues to remain high as compared with the rural death-rate (5·42) which shows that in the crowded areas of towns the diseases of the respiratory system are thriving more. The matter deserves serious attention of the municipal authorities whose efforts should be directed in educating the masses in the methods of prevention of such diseases and improving the general sanitary conditions of the town circles.

47. *Death-rates from Respiratory Diseases in Collectorates.*—High death-rates were recorded in the Collectorates of Kaira (11·78), Ahmedabad (9·53), Surat (9·35), West Khandesh (7·33), Broach (6·96), Nasik (6·46), Ahmednagar (6·37), Sholapur (5·83), East Khandesh (5·81), Kolaba (5·57) and Poona (5·23).

48. *Death-rates from Respiratory Diseases in urban and rural areas.*—High death-rates for urban areas were recorded in the towns of Viramgaum (18·30), Ahmedabad (17·37), Pandharpur (16·84), Sholapur (16·37), Umreth (15·09), Poona City (11·89), Kaira (11·79), Dakore (11·78), Yeola (10·49) and Anand (10·13). Among the rural circles high death-rates were recorded in the talukas of Borsad (19·53), Bardoli (17·12), Matar (14·98), Mandvi (13·13), Mehmedabad (12·94), Nadiad (11·60), Anand (11·31), Wagra (10·40) and Valod (10·07). From the above statistics it will be seen that the high death-rates from Respiratory Diseases are largely reported from the urban as well as rural areas of Gujarat. The rates returned in the districts of Belgaum, Dharwar, Bijapur, Satara and Kanara are lower as compared to the rest of the Province. Bombay city recorded 13,240 deaths due to this cause against 12,559 in 1936, the ratios being 11·40 and 10·81 respectively.

49. *Seasonal mortality of Respiratory Diseases.*—From the Annual Form No. XI in Appendix III it will be seen that respiratory diseases prevail almost equally throughout the year, the months of June and July however have shown a small decrease during the year.

50. *Phthisis.*—There were 25,123 deaths registered from this cause equal to a death-rate of 1·40 per mille of population. The corresponding figures for 1936 were 24,592 and 1·37 respectively. The deaths due to this cause are increasing in recent years. The attention of local bodies has not been attracted by this menace as it should be. Early diagnosis and prompt notification are important factors in the control of the disease. Notification must be followed by preventive measures and this explains the apathy of the local bodies in enforcing the information. Tuberculosis clinics have been opened at Ahmedabad, Surat, Poona, Nasik, Sholapur and Belgaum Civil Hospitals with special staff and full benefit should be taken of the facilities offered in those places.

51. *Death-rates from Phthisis in urban and rural areas.*—The urban death-rate was 2·06 and the rural 1·24 against 1·94 and 1·23 respectively in 1936. High rates for urban areas were recorded in Rander (4·78), Chalisgaon (4·64), Sholapur (4·00), Bhiwandi (3·71), Anand (3·69), Dharangaon (3·67), Poona (3·57), Panwel (3·33), Yeola (2·86), Gokak (2·78) and Kaira (2·77), and high death-rates for rural areas were recorded in the districts of Kolaba (3·24), Kaira (2·29), Ratnagiri (2·18), Thana (1·70), Ahmednagar (1·49), Ahmedabad (1·33), Bombay Suburban (1·27), Satara (1·09) and Poona (1·02). In Bombay city the rate was 1·74 against 1·71 in 1936. In rural areas the incidence of Phthisis continues to be high in the Konkan.

The Medical Officer of Health, Sholapur, reports that roughly one-third of the total deaths from tuberculosis occurred in males and two-thirds in females. An organization called the "Anti-tuberculosis Branch Committee" being a branch of the Anti-Tuberculosis Sub-Committee of Bombay, has been formed in Sholapur town with the Collector as the President and the Civil Surgeon as the Honorary Secretary. The

Committee is now considering the lines on which work should be carried out in the city as well as in the district. The Dhanraj Girji Hospital has also opened a Tuberculosis Clinic for the benefit of the citizens.

Pneumonia (General Prevalence).

52. There were 21,038 deaths from Pneumonia registered during the year. This is equivalent to a death-rate of 1·17 per mille of population, the corresponding figures for the year 1936 being 20,194 and 1·13 respectively.

53. *Deaths from Pneumonia in urban and rural areas.*—The urban death-rate was 4·18 and the rural ·43 against 3·88 and ·44 respectively in the previous year. High death-rates for urban areas were recorded in Pandharpur (10·47), Sholapur (7·63), Poona City (6·51), Bulsar (5·85), Ahmednagar (5·80), Nadiad (4·46), Nasik (3·80), Anand (3·69), Dakore (3·65) and Ahmedabad Cantonment (3·61). Bombay city recorded a death-rate of 7·88 against 7·45 in 1936. High rates in rural areas were recorded in the districts of Surat (2·73), Thana (1·52), Broach (1·26) and Bombay Suburban (1·16).

54. *Whooping Cough.*—One hundred and forty-two deaths due to this cause were recorded in the Province the ratio being ·01 per mille of population. Out of these 73 deaths occurred in rural areas and 69 in urban areas, the ratios being ·00 and ·02 respectively. Among the rural areas Kaira District had the majority of deaths (45) and in town circles Ahmedabad town had 66 deaths. East Khandesh, West Khandesh and Panch Mahals districts had only sporadic cases.

Dysentery and Diarrhœa (General Prevalence).

55. During the year under report deaths from Dysentery and Diarrhœa numbered 28,094 (14,612 males and 13,482 females) the preceding year's figures being 30,104 and 24,910 the quinquennial mean. The death-rate was 1·56 against 1·68 in 1936 and 1·39 the quinquennial mean.

56. The number of deaths registered under Dysentery and Diarrhœa in the previous years is as follows :—

Year.	Number of deaths.
1901–10 mean	52,373
1911–20 ,, ...	36,172
1921–30 ,, ...	24,790
1931–35 ,, ...	24,089
1936	30,104
1937	28,094

57. *Dysentery.*—Under this sub-heading 4,304 deaths were registered against 3,926, the death-rate being ·24 against ·22 in 1936. The urban death-rate was ·51 and the rural ·17 against ·39 and ·21 respectively in 1936.

58. *Diarrhœa.*—Under this heading 23,790 deaths were recorded against 26,178 in the previous year. The death-rate was 1·33 against 1·46 in 1936. The urban death-rate was 1·27 and the rural 1·34 as compared with 1·28 and 1·50 respectively in 1936.

59. Very high records of deaths from Dysentery in the urban areas were returned in the towns of Ahmedabad (387), Surat (133), Sholapur (106), Pandharpur (87), Poona (65) and Nasik (50), and in rural areas in the districts of Kolaba (487), Kaira (403), Kanara (222), East Khandesh (162), Thana (162), Ahmednagar (154), West Khandesh (140), Bombay Suburban (130) and Ahmedabad (120).

In the case of Diarrhœa, larger number of deaths in the urban areas were returned in the towns of Ahmedabad (441), Poona (415), Sholapur (362), Surat (338) and Pandharpur (142) and in rural areas in the districts of Poona (2,421), Ahmednagar (2,149), Satara (2,067), Belgaum (1,968), Bijapur (1,345), East Khandesh (1,298), Sholapur (1,250) and Nasik (1,218).

In Appendix II a table is given showing the effect on the death-rate of the introduction of a piped water supply.

Injuries.

60. There were 7,065 deaths recorded from injuries of which 3,886 were among males and 3,179 among females. The number registered in 1936 was 7,066 while the quinquennial mean was 7,219.

The annual mortality for previous years under this head is as follows :—

Year.	Number of deaths.
1901–10 mean	5,779
1911–20 ,, ...	6,695
1921–30 ,, ...	6,914
1921–35 ,, ...	7,764
1936	7,066
1937	7,065

From the above table it will be seen the deaths under this cause are almost steady during the recent years.

61. *Details of deaths from Injuries.*—Further comparison arranged under the various heads is set forth in the following table :—

	1936.			1937.		
	Male.	Female.	Total.	Male.	Female.	Total.
Drowning	1,073	1,533	2,606	1,098	1,507	2,605
Poisoning	125	37	162	133	39	172
Hanging	199	69	268	225	66	291
Wounding	1,162	447	1,609	1,123	535	1,658
Wild beasts	29	8	37	24	6	30
Snake-bite	744	538	1,282	628	420	1,048
Rabies	81	53	134	105	57	162
Railway accidents ..	78	19	97	85	23	108
Other causes	414	457	871	465	526	991

62. *Deaths from Snake-bite.*—There were 1,048 deaths due to snake-bite against 1,282 in 1936. The highest number occurred in Ratnagiri District, viz. 196 against 218 in 1936. Next in order were Satara (147), Thana (98), West Khandesh (60), Poona (55), Nasik (51) and Belgaum (51).

63. *Deaths from Rabies.*—There were 162 deaths reported under this heading against 134 in the previous year. Ahmedabad District reported the highest number of deaths 39. Kaira had 25 and Belgaum, Satara and Sholapur Districts had 10 deaths each due to this cause.

64. *Details of suicidal deaths.*—The number of suicidal deaths during the year was 671 (402 males and 269 females) against 683 in 1936. Details of districts showing larger number are as follows :—

District.	Drowning.	Poisoning.	Hanging.	Wounding.	Railway.	Total.
Belgaum ..	45	1	40	..	..	86
Dharwar ..	30	2	50	..	..	82
Bijapur ..	11	..	45	..	..	56
Thana ..	8	2	23	8	2	43
East Khandesh ..	24	6	5	..	..	35
Satara ..	14	8	12	..	..	34
Sholapur ..	8	15	9	..	..	32
Surat ..	20	1	8	1	..	30
Bombay City ..	12	58	8	23	12	113

65. *Deaths from other Causes.*—There were 169,124 deaths (85,887 males and 83,237 females) registered against 171,643 deaths in 1936 and 167,248 the mean of the previous five years. The death-rate was 9·43 against 9·57 in 1936 and a quinquennial mean of 9·33.

The number of deaths recorded in previous years under this head is as follows :—

Year.	Number of deaths.	Ratio per mille.
1901–10 mean	135,548	8·87
1911–20 ,, ...	148,759	9·25
1921–30 ,, ...	145,338	9·13
1931–35 ,, ...	165,112	9·22
1936	171,643	9·57
1937	169,124	9·47

66. *Deaths from child-birth.*—The number of deaths recorded under this head during 1937 was 3,093 as compared with 3,203 in 1936. For the Northern, Central and Southern Registration Districts, the deaths were 659, 1,002 and 1,270 respectively. In Bombay city 162 deaths were registered during the year as against 181 in 1936. The maternal mortality rate per 1,000 registered births including still-births in the Province works out to 4·17 which shows a decline as compared with 4·24 of 1936.

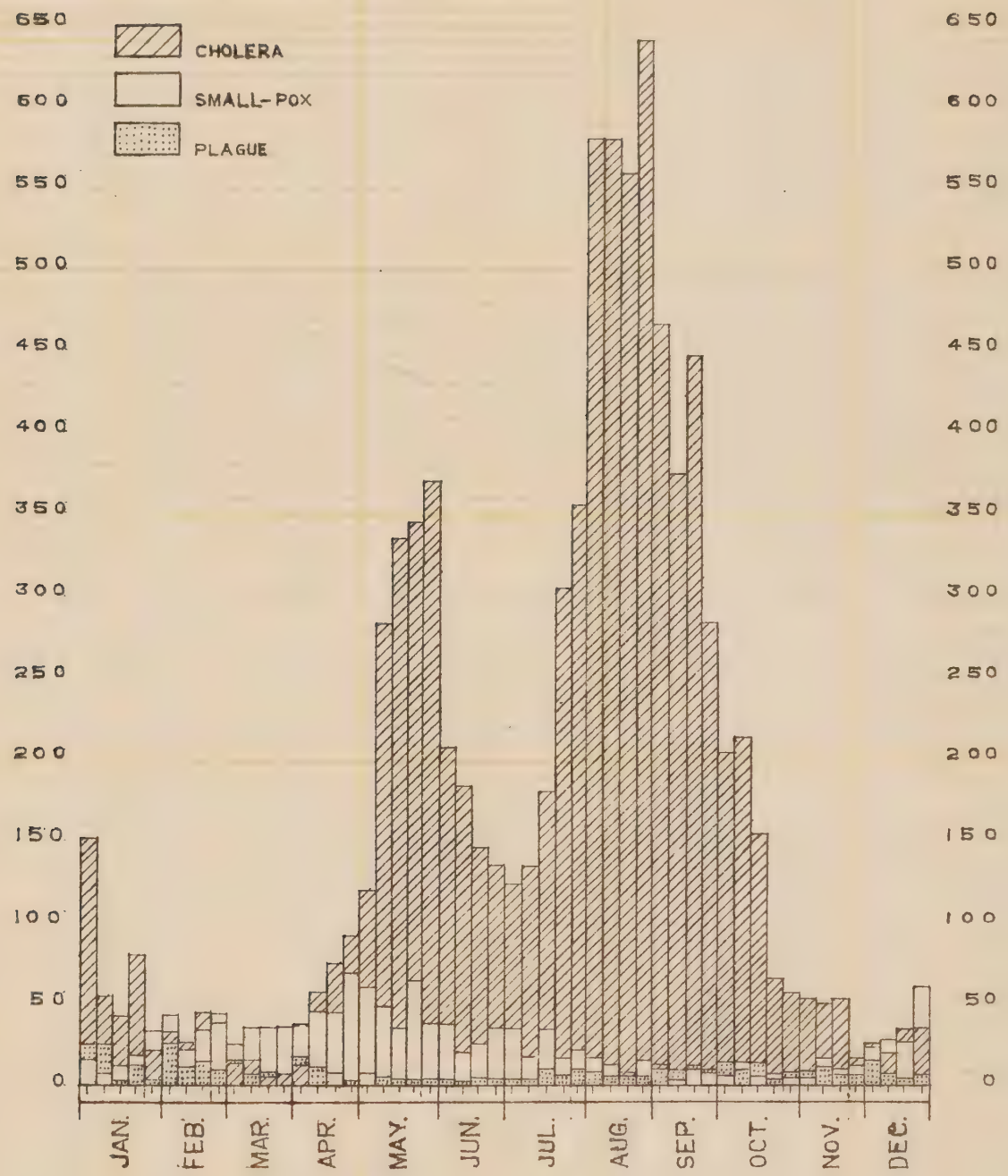
The annual mortality for previous years since 1921 is as follows :—

Year.	Number of deaths.	Year.	Number of deaths.
1921	3,595	1930 ..	3,616
1922	3,414	1931 ..	4,019
1923	3,208	1932 ..	3,068
1924	3,197	1933 ..	3,489
1925	2,662	1934 ..	3,521
1926	3,300	1935 ..	4,047
1927	2,928	1936 ..	3,203
1928	3,412	1937 ..	3,093
1929	3,689		

In the Province this works out to the death of one woman in child-birth for every 243 births including still-births as compared with one per 235 in 1936. The urban and rural figures were 1 per 191 and 253 respectively. By Registration Districts the rate of maternal mortality was the highest in the Southern Registration District where it was 1 to 184. It was 1 to 221 in the Central, and 1 to 377 in the Northern Registration Districts.

CHART VI

WEEKLY INCIDENCE OF DEATHS FROM EPIDEMIC DISEASES DURING THE YEAR 1937.



G.P.Z.O. POONA, 1938.

67. *Deaths from child-birth in the Collectorates.*—In the Collectorates the maternal mortality rate was high in Kanara where it was 1 to 54. It was 1 to 144 in Ahmednagar, 1 to 165 in Dharwar and 1 to 166 in Panch Mahals.

68. *Deaths from child-birth in urban areas.*—In Bombay city the rate of maternal mortality was 1 to 231 births including still-births. Among other towns high rates were reported from Sangamner 1 to 22, Viramgaum 1 to 33, Gokarn 1 to 45, Erandol 1 to 52, Satara 1 to 54, Guledgud 1 to 64 and Broach 1 to 66.

69. *Diphtheria.*—There were 79 deaths reported from this disease during the year against 43 in 1936. Out of these 75 occurred in rural areas, viz. Poona District (40), Ahmedabad (21), Thana (10), Kolaba (3) and Nasik (1) and four in town circles, viz. Poona town (3) and Ahmednagar (1).

70. *Chicken-pox.*—Ten deaths due to this cause were recorded out of which eight occurred in the rural areas, viz. Kaira District (3), Panch Mahals (2), West Khandesh (2) and East Khandesh (1), and remaining two were reported in Ahmedabad town.

71. *Leprosy.*—There were 173 deaths reported as due to this cause. The highest number of deaths 110 occurred in East Khandesh District.

72. *Cancer.*—The number of deaths recorded under this cause was 119. Among rural circles Surat District had the majority of deaths (38). Among town circles, Ahmedabad had 47 deaths and Surat 24 deaths.

The number of deaths from chief causes for each Collectorate and by months is shown in Annual Forms Nos. VII to XII.

CHAPTER IV.

Epidemiology.

Cholera (General Prevalence).

73. The number of deaths due to cholera during the year was 10,992 as against 11,304 in 1936 and 8,599 the quinquennial mean. The death-rate was ·61 against ·63 in 1936 the quinquennial mean being ·48. The urban and rural death-rates for the Province were ·19 and ·72 respectively against ·16 and ·74 in the preceding year.

Cholera prevailed in 170 registration circles and 1,797 villages as compared with 147 and 1,979 respectively in 1936 and the ratio of deaths per 1,000 of population in affected towns and villages was 3·01. There were 23,572 cases as against 23,277 in 1936. The case mortality rate was 46·63.

The following table gives the deaths recorded in previous years since 1911 :—

Year.	Number of deaths.	Year.	Number of deaths
1911	5,808	1925	56
1912	57,789	1926	72
1913	5,108	1927	26,020
1914	17,778	1928	6,667
1915	350	1929	2,673
1916	18,610	1930	15,142
1917	16,554	1931	18,578
1918	8,832	1932	1,338
1919	51,235	1933	7,794
1920	2,047	1934	11,361
1921	3,092	1935	11,191
1922	2,743	1936	11,304
1923	9,212	1937	10,992
1924	7,827		

Distribution—*vide* Annual Form No. VII.

The deaths from cholera are practically the same as in previous 3 years. The peculiar feature which cholera is assuming is the absence of violent fluctuations which are replaced by almost uniform toll of deaths year after year. The seasonal periodicity is still apparent but the disease continues in some tracts almost throughout the year in contrast to the waves during certain months and complete absence afterwards. These facts are explained by the more intensive methods of suppression when the epidemic breaks out but the conditions which will make an outbreak impossible do not prevail anywhere except in few large towns. Sanitation of the villages is deplorable, water supply is often inadequate and practically no precaution is taken to prevent pollution of the drinking water supply. It is a well known fact that cholera breaks out in the villages on the banks of certain rivers on which the villages depend for their water supply and yet these very rivers are used as latrines by the villagers.

74. *Deaths from Cholera by Collectorates.*—All the districts except Ahmedabad and Panch Mahals were more or less affected. The epidemic was severe in the districts of West Khandesh (3,736 deaths), Nasik (1,837), Satara (1,186), East Khandesh (1,036), Ahmednagar (1,035) and Sholapur (501). Bombay city reported only four deaths against five in 1936.

Out of the total 10,992 deaths 3,318 were recorded during the first half of the year and 7,674 during the latter half. The epidemic was at its height in the month of August (3,533 deaths) and the lowest number of deaths (86) occurred in March. The infection in East and West Khandesh Districts started during the month of April. In Satara, Sholapur and Dharwar Districts the infection continued from the previous year and it lasted almost throughout the year. In Ahmednagar and Nasik Districts a few sporadic cases occurred in the beginning

of the year; however in these as well as in Ratnagiri District the epidemic broke out in the month of April. Surat and Broach Districts were infected late in August. The real epidemic in the Province was confined to the period between April and October. The least affected districts were Kaira, Kanara, Bombay Suburban, Broach and Belgaum in which only a few sporadic cases were recorded during the year.

75. *Deaths from Cholera in urban and rural areas.*—In the Province the number of deaths recorded in urban areas was 660 and in rural areas 10,332 against 600 and 10,704 in 1936.

In urban areas high death-rates were recorded in the towns of Karad (3·59), Malegaon (3·33), Ilkal (2·38), Manmad (2·20), Chopda (1·68). Sangamner (1·64), Parola (1·63), Nasik (1·52), Kalyan (1·26) and Bhusaval (1·11), and in rural areas in the talukas of Sakri (15·15), Nandurbar (7·44), Nawapur (7·11) Shahada (4·71), Malegaon (3·49), Shirala (3·36), Baglan (3·22), Sinnar (3·22) and Taloda (3·12).

76. *Brief history of Cholera epidemic by Registration Districts.*—The heaviest incidence was in the Northern Registration District in which 4,846 deaths occurred, the next came the Central Registration District with 3,901 deaths and the last was the Southern with 2,241 deaths.

In the Central Registration District, 7,489 cases and 3,901 deaths were reported from 691 villages in 74 circles of Registration. The worst affected district was Nasik in which 3,676 cases and 1,837 deaths occurred. Cholera broke out in the month of April in this district. There was cholera at this time in His Exalted Highness the Nizam's Dominions and in April and May there were 20 and 56 infected villages respectively. Malegaon, Baglan, Sinnar, Nasik and Igatpuri were the more affected talukas. Among towns Malegaon, Nasik and Manmad recorded high number of deaths. In Ahmednagar District there were 2,243 cases and 1,035 deaths. All the rural circles and three urban circles were affected. The highest incidence was in Kopergaon Taluka. Among towns Sangamner had 25 deaths. The largest number of deaths (289) occurred in August. Thana District claimed 619 cases and 430 deaths. They were reported from 87 villages distributed over all the 15 circles of registration. The largest number of deaths (111) occurred in December. Dahanu Taluka returned the h ghest number of deaths, viz. 87. Among towns Kalyan stood first with 33 deaths. In Kolaba District cholera had appeared in all the rural circles except Uran Peta infecting 61 villages including towns. There were 479 cases and 360 deaths. September was the month of high incidence claiming 132 deaths. Panwel Taluka was more affected than the rest. Ratnagiri District had two outbreaks during the year, one during April and May and another during the period from September to November. There were 383 cases and 188 deaths in all. 63 villages in 5 circles of registration were involved. Chiplun and Sangameshwar Talukas claimed the majority of deaths. Poona District had on y 64 cases and 41 deaths during the year reported from 14 villages. Mawal Taluka

claimed the highest number of deaths (11). In Poona city only two deaths due to cholera were registered. In the Bombay Suburban District only one village Turbhe in South Salsette Taluka was affected which had 22 attacks and 10 deaths. Compared with the year preceding the incidence of cholera in the Northern Registration District was very high, the brunt of the epidemic being borne by the Khandesh districts. In the districts of Gujarat only 74 cholera deaths occurred of which 55 were reported from Surat District. Among the Khandesh Districts, West Khandesh was the worst affected in which 418 villages in all the ten circles of registration were infected, reporting 8,456 cases and 3,736 deaths. In East Khandesh District 184 villages in 20 circles of registration reported infection the cases and deaths being 2,951 and 1,036 respectively. Both the districts were simultaneously infected. The first case was reported in Nardana village of Sindkheda Taluka of West Khandesh District on 27th April. The infection was brought from Nasik District by people returning from Saptasringi fair. The fair itself was however free from cholera. The same source was responsible for the subsequent infection in village Gorane in the same taluka on 3rd May. The infection then spread rapidly to other villages in this taluka. In Nandurbar Taluka, Sindarde village was infected on 6th May 1937 the infection being local. In Nandurbar town cholera was imported from Nasik District on 8th May. In Shirpur Taluka, Tikwade and Arthe villages were first infected and were responsible for the spread of the disease in the taluka. In Shahada town cholera appeared on 14th May. The town being situated on Gomi river infection travelled down infecting some of the river-side villages. Feasts in several villages also contributed to the spread of infection. Though cholera was well under control in West Khandesh District during the period from May to July it flared up again in the following months. This was mainly due to the infection of nullah and river water which is chiefly used for drinking purposes in the district. The weekly bazars and easy road communication also facilitated the spread of the disease. In East Khandesh District the first outbreak occurred at Bhusaval town on 27th April. Bhadgaon town reported infection next on 30th April. During the month of May villages in different talukas began to report infection which was either imported from infected areas or indigenous. There was rise in the incidence in July which reached its maximum in the month of August. In Surat District the infection was mainly confined to Mandvi Taluka reporting 78 cases and 41 deaths. The first village to be affected in this taluka was Puna in August where the infection was local. The disease lingered in a few villages of the taluka from August to November. In Broach and Kaira Districts the disease was only sporadic and Panch Mahals and Ahmedabad Districts escaped entirely. As compared to 1936 the incidence of cholera in Southern Registration District was light during 1937. There were 4,546 cases and 2,241 deaths reported from 486 villages in 56 circles of registration. Satara District was rather seriously involved with 244 villages being affected in 14 circles of registration. The case mortality rate in this district was 50 per cent. The infection in this district was carried over from the year preceding and

smouldered up to the month of March. From April fresh infection began to occur. The Yerad fair in Karad Taluka held on 26th April and Karad fair in the beginning of May were responsible to a great extent for the spread of infection in the district. Fifteen villages in Patan and one each in the talukas of Walwa, Karad and Shirala got the infection from Yerad fair. Infection in four villages in Satara Taluka, one village each in Patan, Karad and Koregaon was traced to the Karad fair. Polluted river water of Krishna and Koyana also played a great part in this respect and was responsible for infecting 24 and 35 villages respectively. Patan, Karad and Shirala rural circles suffered heavily. Among towns Karad was the worst affected claiming 111 cases and 55 deaths. The incidence of cholera was highest in the month of May. In Sholapur District also the infection was continuous from the previous year. From May it began to rise recording highest number of deaths during the month of August. The total deaths in the district for the year were 501. Sholapur and Barsi Talukas were more affected as compared with the rest. In Sholapur town out of the 24 cases, 11 were imported from Arkonum, Tuljapur, Ter and Amdura in His Exalted Highness the Nizam's Dominions. The earliest case imported was on 28th March 1937 in that town. Pandharpur town was infected on 9th April the infection being imported. There were six deaths due to cholera in Pandharpur during the year. The case mortality rate in Sholapur District was 48 per cent. In Dharwar District there were 342 deaths due to cholera. The infection was continued from the year preceding and was at its height in the month of May in which 102 deaths occurred. Eighty-six villages in 14 circles of registration were affected. Ranebennur Taluka was highly affected. In this taluka 14 villages out of 30, got the infection from the polluted water of Tungabhadra river. The talukas of Dharwar, Mundargi and Kalghatgi were also affected though not severely. The case mortality rate was 50 per cent. In Bijapur District, sporadic cases of cholera were reported during March, April and May and rise was registered from June. The highest mortality was recorded in July (84). The infection disappeared from the district in November. Hungund, Indi and Bagewadi Talukas claimed the majority of deaths. In this district also the infection was introduced from outside source in several villages and the water courses helped the spread of infection in some villages. Among towns Ilkal had a large number of cases and deaths, viz. 101 and 34 respectively. Belgaum District had only 37 cases and 19 deaths reported from 12 villages in 6 circles of registration. Parasgad Taluka was more affected. In Kanara District only one village Bankal in Sirsi Taluka was affected where 8 cases and 3 deaths occurred. The infection was brought here from the Mysore State.

77. *Preventive measures.*—The usual precautionary measures such as distribution of potash permanganate and cholera pills, permanganating water supplies, inoculation, etc., were carried out in all the affected districts. Special precautions were taken at the time of the Ashadhi fair at Pandharpur and entry to uninoculated persons was prohibited at the pilgrim centre during the fair as was done during 1936. Details have

been given in Chapter V—" Fairs and Festivals ". In East Khandesh District the infection being wide-spread weekly bazars were closed in many villages. Some District Local Boards engaged epidemic workers in their areas who attended to the disinfection of water supplies and distribution of cholera medicines. The responsibility regarding prompt notification of cholera is also being realised to a greater extent by the village officers and in many cases even doubtful outbreaks are being promptly notified. Such action on the part of the village officers is to be commended as it enables the authorities concerned to rush medical aid to such villages with the least possible delay. A few permanent Epidemic Medical Officers are now available; they are sent to the villages which send reports and although sometimes the reports are not correct, the village officers are encouraged to send prompt intimation of outbreaks of any unusual sickness. The new service of Epidemic Medical Officers has proved to be of great value in verifying such reports and also in giving speedier relief.

Inoculations.—During the year under report 28 special medical officers were appointed by Government on cholera duty in the Province in addition to those appointed by the District Local Boards.

The total number of persons inoculated was 457,666 as against 444,514 in 1936.

The inoculations were performed by the special inoculators, Medical Officers in charge of Hospitals and Dispensaries, Epidemic Medical Officers and private practitioners. Out of the total number of 457,666 inoculations, 201,343 were performed in the Southern Registration District, 129,003 in the Northern Registration District and 127,320 in the Central. The mass inoculation campaign at Pandharpur during the Ashadhi fair alone has contributed 121,479 to the total figure of inoculations given above.

78. *Expenditure on cholera outbreak and inoculation work.*—During the year under report a grant of Rs. 4,000 was sanctioned by Government for measures against outbreaks of cholera, e.g. supply of potash permanganate for sterilization of village water supplies, cholera treatments and ingredients for Tomb's mixture. Out of this sum, Rs. 3,174 were spent. Expenditure on pay, travelling allowance and cont ngencies of Government inoculators on cholera duty amounted to Rs. 7,588 and that on cholera vaccine Rs. 4,143.

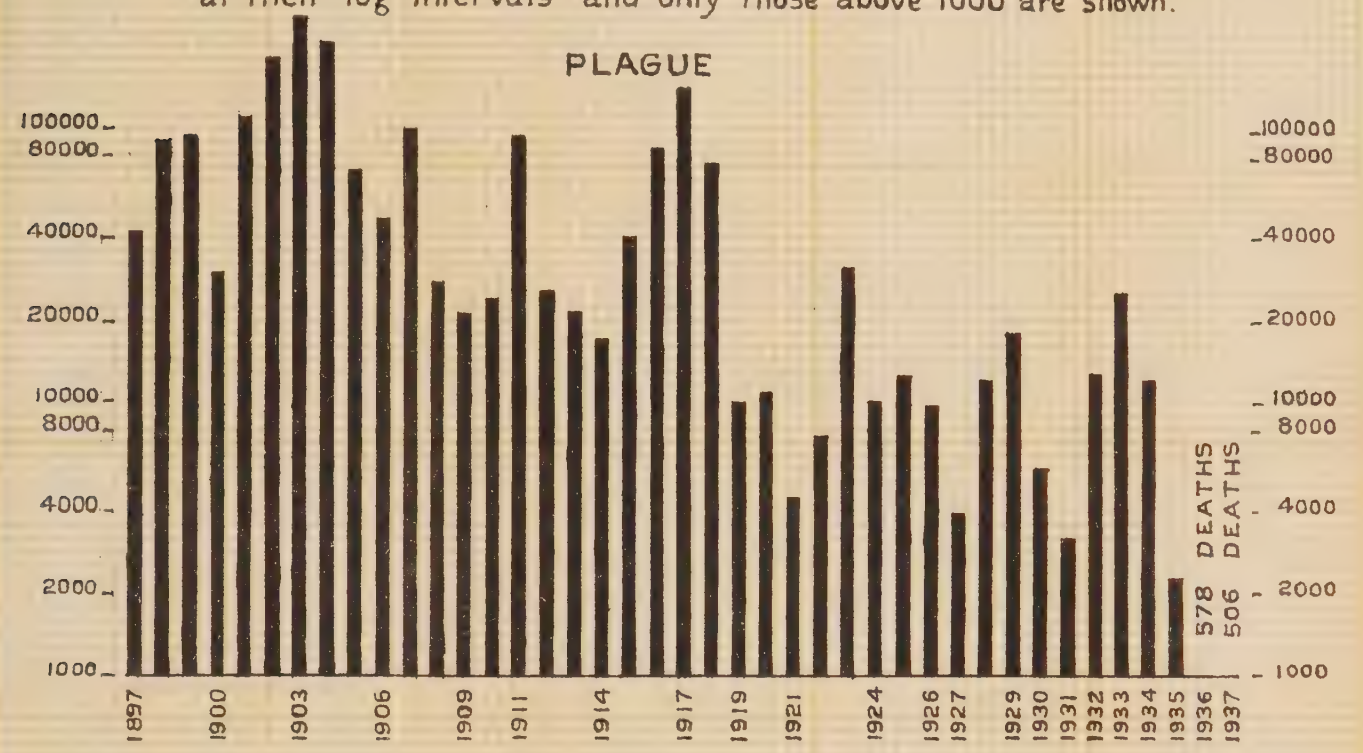
Small-pox (General prevalence).

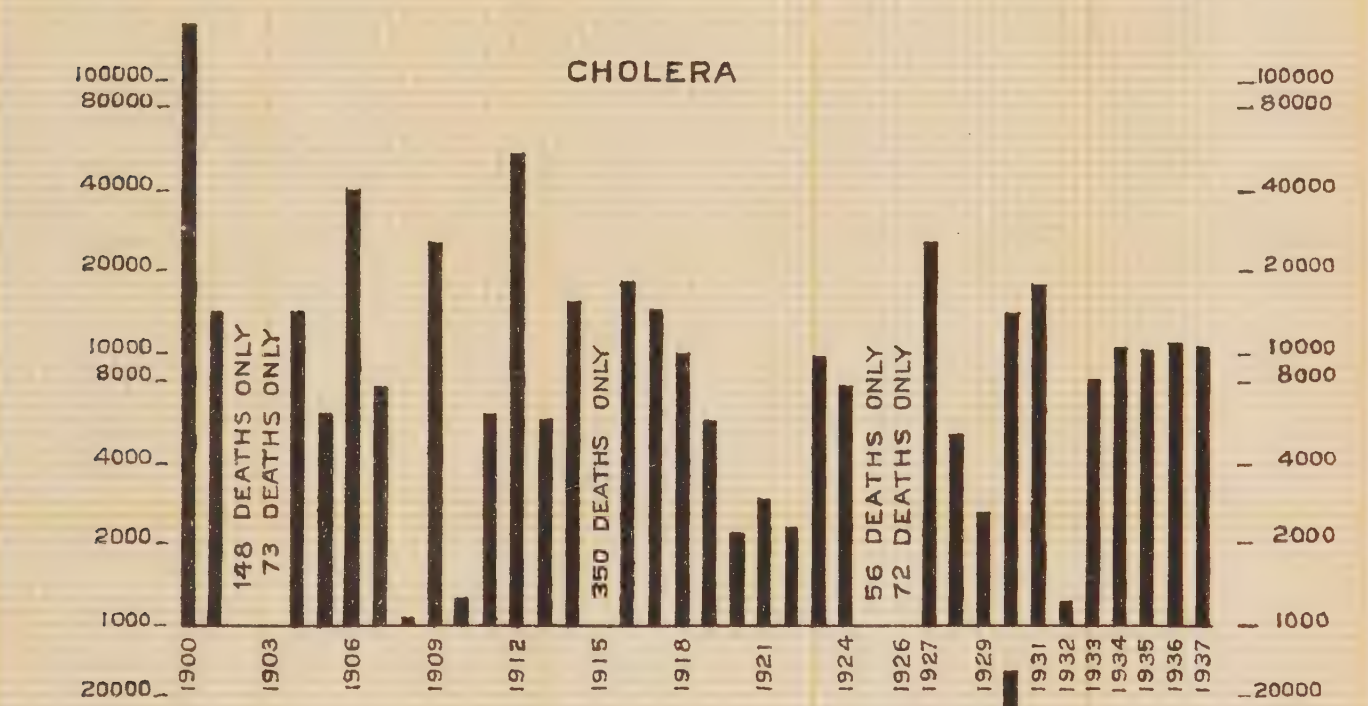
79. After the peak of 1935 in which year 13,405 small-pox deaths were registered, a steady decline has been noticed in small-pox deaths during the last two years. The total deaths recorded during the year were 1,810 (885 males and 925 fema'es) against 4,320 in 1936 and 6,168 the mean of the prev ous five years. The death rate during 1937 was ·11 per mille of population against ·24 in 1936 and ·34 the quinquennial

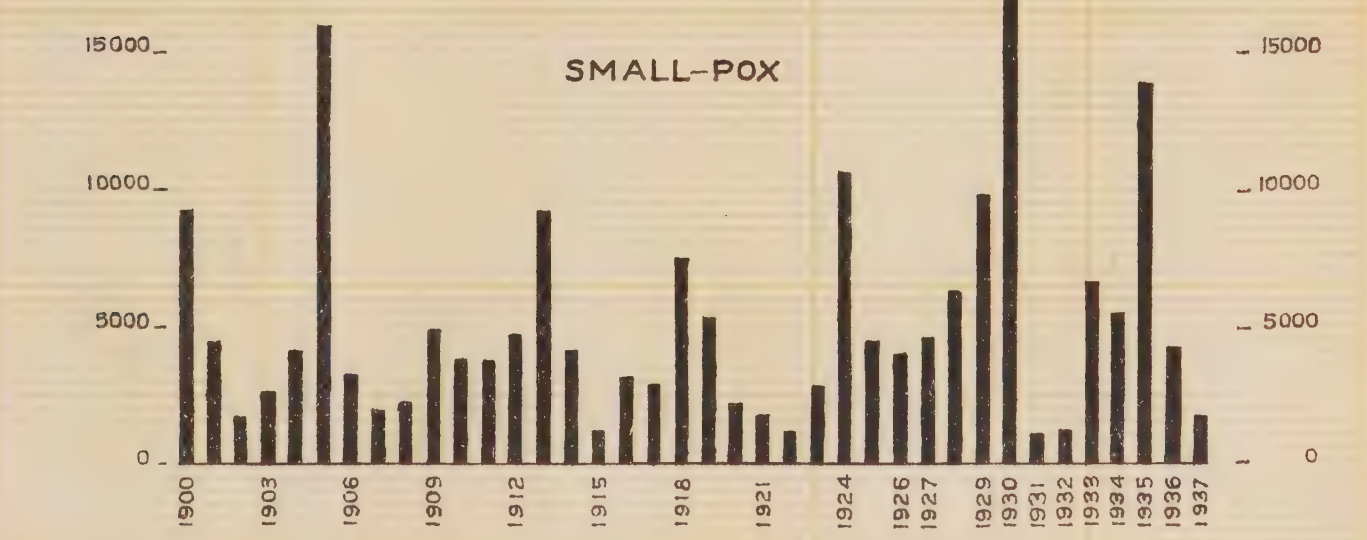
CHART VII

ANNUAL INCIDENCE OF DEATHS FROM EPIDEMIC DISEASES.

Scale figures represent actual deaths for Plague and Cholera. Figures are at their log intervals and only those above 1000 are shown.







G.P.Z.O.POONA, 1938.

mean. The annual mortality for previous years is given in the following table :—

Year.	Number of deaths.
1901–10 mean	4,775
1911–20 ,, ...	4,430
1921–30 ,, ...	6,337
1931–35 ,, ...	5,517
1936	4,320
1937	1,810

Small-pox was reported from 377 villages in 138 circles of Registration as compared with 997 and 198 respectively in the preceding year. The ratio of deaths per 1,000 of population in affected towns and villages in the Province works out to ·53. The disease was present throughout the year. The highest incidence was however during the period from March to May which coincides with the hot season. The tendency of earlier incidence can be noticed from the deaths reported during January and February and also in December. The highest mortality (290) occurred in April. The case mortality during the year was 24·79 as against 23·73 in 1936.

From the ratio of deaths to attacks it will be seen that the virulence of small-pox as now prevailing in the Province has lessened. This is greatly to be attributed to the immunity which is being developed in the population by vaccination and revaccination. Even though few cases occur among such persons they are very mild and deaths among them are rare. It is the unvaccinated population, majority of which happen to be children, that provide the nucleus of infection. From this nucleus the infection spreads to adolescent and adult population whose immunity is wearing off. The risk of avoiding vaccination is not realised by some persons until it is too late. Vaccination not being compulsory such offenders against public safety cannot, at present, be brought to book. The position is however improving though gradually in many places, which is evidenced by the rush at the vaccination stations especially when the disease threatens to break out in a particular area. During the last few years demand from municipalities for compulsory vaccination is rapidly increasing and the number of municipal towns where vaccination is compulsory has risen to 53 in 1937 from 41 in the year 1936 and 18 in 1934 in the Province excluding Bombay city and the six Cantonments of Ahmedabad, Ahmednagar, Poona, Kirkee, Belgaum and Deolali. In the rural area vaccination has been made compulsory in 10 villages in Belgaum District.

A detailed study of the small-pox cases which occurred during the three years from 1935–36 to 1937–38 in Bombay Province was made which has revealed that amongst the vaccinated the incidence of small-pox is very low within the age of one year. Between 1 and 6, it increases considerably. But the increase after 6 is from four to five times as much as up to 6 years. Among unvaccinated on the other hand the number of cases as well as deaths up to 6 years are far in excess of those among persons of above 6 years. Information about the number of persons exposed to risk in these groups is not available and the number of persons

in the groups above 6 years is certainly many times more than the number in 1 to 6 age group which again is greater than persons under one. But these conditions apply equally to the vaccinated as well as unvaccinated and the striking difference of greater incidence as well as greater mortality among vaccinated persons aged more than 6 as compared to unvaccinated can only be explained by the fact that the increased infantile vaccination has shifted the incidence of small-pox from early childhood to latter years. It was on account of this increased incidence of small-pox among older children and adults that revaccination at the age of about seven has become necessary. The figures on which these conclusions are drawn are given in the following table :—

Registration Districts and years.	Age periods of cases and deaths (Vaccinated).				Age periods of cases and deaths (Unvaccinated).			
	Under 1 year.	1 to 6.	Above 6.	Total.	Under 1 year.	1 to 6.	Above 6.	Total.
1935–36								
Northern Registration District ..	17*	167	371	555	164	435	239	838
	1†	11	18	30	52	108	42	202
Southern Registration District ..	23	538	4,502	5,063	357	1,425	1,075	2,857
	5	47	345	397	232	389	188	809
Central Registration District ..	22	534	1,389	1,945	290	875	522	1,687
	2	22	89	63	119	159	63	341
Total ..	62	1,239	6,262	7,563	811	2,735	1,836	5,382
	8	80	452	490	403	656	293	1,352
1936–37								
Northern Registration District ..	2	85	203	290	81	312	200	593
	0	9	14	23	32	69	23	124
Southern Registration District ..	2	232	1,271	1,505	120	495	349	964
	3	23	127	153	80	139	80	299
Central Registration District ..	8	86	398	492	88	250	188	526
	3	7	11	21	28	41	23	92
Total ..	12	403	1,872	2,287	289	1,057	737	2,083
	6	39	152	197	140	249	126	515
1937-38								
Northern Registration District ..	1	32	165	198	54	220	129	403
	0	1	7	8	10	62	21	93
Southern Registration District ..	2	23	194	219	20	74	67	161
	0	0	9	9	6	18	12	36
Central Registration District ..	5	89	379	473	93	264	173	530
	0	17	18	35	29	26	22	77
Total ..	8	144	738	890	167	558	369	1,094
	0	18	34	52	45	106	55	206

Attacks* Deaths†

A certain section of the people is opposed to vaccination on humanitarian grounds and also because they have no faith in vaccination. Their main argument is that raising of general standard of sanitation would drive the disease away automatically. They also point out to some countries where vaccination is not compulsory. It must not be forgotten that preventive measures are to be adopted according to the local conditions in which economic and educational status figures prominently. In those countries where the need of compulsory vaccination is not felt to be as acute as in old days, the freedom from this disease is the result of the strict enforcement of severe vaccination laws in the past. This freedom is being maintained by the co-operation of the public with highly developed public health organisation. In such countries the very first case of small-pox is notified often by the father himself; there is no attempt to hide the cases; there is no hindrance to the removal of the patient to an isolation hospital; every contact offers himself for vaccination; the medical attendant and the family willingly help the health authorities in tracing the source of infection, disinfecting the premises and adopting other preventive measures. When such conditions prevail in India there will be no need for compulsory laws for vaccination; till then raising the communal immunity by vaccination and revaccination is the only possible method and it would be an unwise step to neglect it just because vaccination is not compulsory in some countries.

80. *Deaths and attacks from small-pox by collectorates.*—All the districts in the Province reported cases, though some of them were only slightly affected reporting a few sporadic cases. High death-rates were recorded in the collectorates of Broach (·34), East Khandesh (·11), Panch Mahals (·11), Ahmedabad (·11), Ratnagiri (·11), Nasik (·10) and Kanara (·9), and the lowest (·01) in West Khandesh, Belgaum and Dharwar. The rate in Bombay city was ·59 against ·78 in 1936.

The following table shows the number of attacks and deaths by districts :—

District.	Attacks.	Deaths.	District.	Attacks.	Deaths.
East Khandesh ..	785	134	Bombay Suburban ..	23	9
West Khandesh ..	19	10	Kolaba	650	58
Surat ..	178	32	Ratnagiri ..	849	140
Broach	583	115	Belgaum	48	8
Kaira	274	58	Dharwar ..	83	6
Panch Mahals ..	348	50	Bijapur ..	232	36
Ahmedabad ..	290	105	Kanara	140	32
Ahmednagar ..	106	16	Sholapur	266	47
Poona	240	29	Satara	653	106
Nasik	219	104	Bombay city ..	1,179	687
Thana	135	28			

81. *Deaths from small-pox in urban and rural areas.*—Among towns high death-rates were recorded in Borsad (1·67), Uran (1·33),

Kapadvanj (1·03), Chiplun (·38), Karwar (·37) and Panwel (·36) and in rural areas in the talukas of Ankleshwar (1·66), Edlabad (1·05), Sinnar (·48), Bhusawal (·40), Igatpuri (·38) and Parola (·30).

The prevalence of small-pox in Bombay city is becoming an acute problem. The port is declared infected several times; this causes inconvenience to overseas passengers and international traffic. Small-pox spreads from the city to the adjacent and even distant rural areas; the infection in the city is undoubtedly responsible in part at least for keeping up the disease throughout the year. The Medical Officer of Health, Kurla Municipality, reports that the first case of small-pox which was reported on 5th January 1938 was of a person living in Bombay and had come to Kurla to stay with his relatives. He got the attack only two days after his arrival.

82. *Brief history of small-pox epidemic by Registration Districts.*—The highest incidence was in the Northern Registration District where 152 villages in 48 circles of registration were infected reporting 2,477 cases and 504 deaths. The case mortality rate was 20·31 per 100 registered cases against 26·93 in 1936. The districts chiefly affected were East Khandesh, Broach and Ahmedabad. In East Khandesh District 49 villages in 11 circles of registration were affected reporting 134 deaths. The highest number of deaths (42) occurred during the month of April. Edlabad Peta was more affected than the rest. In Broach District 115 deaths were reported from 32 villages in five circles of registration. The infection was mainly confined to Ankleshwar Taluka. In Ahmedabad District 105 deaths occurred in 14 villages in seven circles of registration. Dhandhuka and Gogho Talukas had the majority of deaths. Ahmedabad town had 61 deaths due to small-pox. Among the remaining districts the infection was light the least affected district being West Khandesh with 10 deaths only. In the Central Registration District 121 villages in 54 circles of registration were affected reporting 2,222 cases and 384 deaths. The leading district was Ratnagiri in which 140 deaths occurred. Khed, Mandangad, Dapoli and Rajapur rural circles were mainly affected. In Nasik District 104 deaths occurred the majority of deaths being reported from Malegaon and Baglan Talukas. The case mortality rate in this district was the highest, viz., 47·49 per 100 cases. This probably is due to many cases being not reported. In the remaining districts the infection was light. The case mortality in Kolaba and Poona Districts was very low, viz., 8·92 and 12·08 respectively per 100 cases. In the Southern Registration District, 1,422 cases and 235 deaths occurred in 103 villages in 35 circles of registration. Satara was the only district which was considerably affected reporting 106 deaths. Khatav, Walwa, Karad, Satara, Khanapur and Patan Talukas had almost all the cases distributed amongst them. Sholapur (47), Bijapur (36), Kanara (32), Belgaum (8) and Dharwar (6) recorded deaths as shown against each. The case mortality was the highest, viz., 23 per 100 cases in

Kanara District and the lowest, viz., 7 per 100 cases in Dharwar District. In Bombay city 1,179 cases and 687 deaths occurred giving a case mortality rate of 58 per 100 of recorded cases. The ratio of deaths per mille of population in Bombay city during the year was ·59 against ·78 in 1936 the number of deaths in that year being 906.

Of the 1,810 deaths from small-pox in the Province 443 were of infants under one year and 804 of children between 1 to 10 years of age, i.e. 68 per cent. of the deaths were among children. The figure reveals the ravages of small-pox among this susceptible age period. This is mainly to be attributed to the apathy of the people to get their children vaccinated in time and thus exposing them to small-pox infection. Enquiries made by the Officers of this Department during their tours have revealed that out of 149 blind persons met with in 74 villages 66 owed their blindness to small-pox.

83. *Vaccinal condition.*—During the year under report 64 cases of small-pox were treated in the Civil Hospitals in the Province as against 75 in 1936. Of the cases treated 18 had been vaccinated as against 35 in the previous year. Seven were stated to have been successfully vaccinated but no vaccination cicatrix could be seen. Thirty-seven were unvaccinated and 2 were stated to have been vaccinated during incubation period. There were no cases during the year of those stated to have been successfully revaccinated on the Hospital records.

Plague (General prevalence).

84. A new record of lowest plague deaths during the last 42 years was the feature of the year under report. There were 506 deaths due to this cause as compared with 578 in 1936 and 11,069 the quinquennial mean. The ratio of deaths per mille of population during the year under report was ·03 as against the same figure in 1936 and ·62 the quinquennial mean.

Cases occurred in 31 circles of registration infecting 77 villages as compared with 30 and 65 respectively in the preceding year. The ratio of deaths per 1,000 of population n affected towns and villages works out to 1·23 as against 1·18 in 1936. The total number of attacks recorded was 781 giving a case mortality rate 64·78 per cent. against 66·05 in 1936. The disease was confined to the Southern Registration District. The infection of the year preceding was carried over in all the infected districts. January (70), February (57) and March (56) recorded deaths as shown against each. March (28), May and June (9) were the months of very light incidence followed by a slight rise in July (42 deaths). The disease remained steady in the remaining months.

The total number of deaths recorded in each year since 1911 is given below :—

Year.	Number of deaths.	Year.	Number of deaths.
1911	97,248	1925	12,551
1912	27,863	1926	9,839
1913	24,840	1927	4,075
1914	18,529	1928	13,563
1915	40,689	1929	18,014
1916	79,349	1930	5,026
1917	159,858	1931	3,506
1918	73,893	1932	14,446
1919	9,141	1933	24,560
1920	13,471	1934	13,307
1921	4,617	1935	2,453
1922	7,692	1936	578
1923	33,251	1937	506
1924	9,092		

Though the outbreak during 1937 was more extensive in the sense that more villages (77) were affected as compared to 1936 (65 villages) it was less intensive reporting less deaths as compared to the preceding year. The timely precautions including cyanide fumigation adopted in the affected areas cut the epidemic short in many places.

Plague is undoubtedly a dreaded disease and the panic it used to strike not so very long ago in the city of Bombay and other places is not forgotten at least by some people. Psychological reaction of the public however is not today what it was some ten years ago. Outbreaks whether of plague or any other disease attract far more notice of the public nowadays than before ; but the people are not panic-stricken to the same extent. This may perhaps be due to the outbreaks being limited in area and number but there is no doubt that the public are better educated as to the cause and the mode of spread of most of the epidemic diseases and their reaction is now based on logical and businesslike methods. Plague cannot be lightly treated but the figures quoted above show that plague is decreasing in the Bombay Province. The anti-plague measures including calcium cyanide fumigation have no doubt greatly influenced the trend of plague epidemic ; however the recent improvement should not raise any false hopes in the mind of the public and the local bodies ought

not to slacken the measures which are still necessary for the complete eradication of the disease. So long as the infection lingers it would be suicidal to neglect the possibility of the infection flaring at any time and the attempts to eradicate must now be concentrated on the endemic areas.

85. *Deaths from plague by Collectorates.*—The distribution of plague given in Annual Form No. XII shows that the more affected districts were Belgaum (218 deaths) and Dharwar (166). Satara and Kanara districts were only slightly affected while Nasik, Ratnagiri, Bijapur and Sholapur districts had one death each only. The highest death-rate was ·20 recorded in Belgaum district. Bombay city had no plague death on record during the year.

86. *Deaths from plague in rural and urban areas.*—For the urban and rural areas in the Province there were 52 and 454 deaths equal to a ratio ·02 and ·03 respectively. High death-rates for urban areas were recorded in the towns of Dharwar (·91), Karwar (·37), and Belgaum (·10) and among rural areas in the talukas of Chandgad 2·77), Kalghatgi (·97), Belgaum (·82), Haliyal (·65), Ron (·52), Mundgod (·49) and Mundargi (·42).

87. *Brief history of plague outbreaks in the Registration Districts.*—Almost all the plague deaths were reported from the Southern Registration District, viz. 504 deaths against 571 in 1936. The death-rate was ·09 as compared with ·10 in the preceding year and 1·83 the quinquennial mean. ·29 circles of Registration and 75 villages were infected. The highest number of 70 deaths was recorded in January 1937 and the lowest figure was returned in May and June (9 deaths). As compared with the year preceding the incidence in this Registration District was almost steady during the year. In Belgaum district the infection of the previous year was carried over. 33 villages in 7 circles of Registration were affected in this district. Chandgad Peta claimed the majority of deaths. Belgaum, Hukeri, Chikodi and Athni talukas were also infected though not seriously. Belgaum town had 4 deaths due to plague. In the district the incidence was the highest during the month of August. In Dharwar district 23 villages in 12 circles of Registration were affected. The infection continued from the year preceding up to May and after total absence in June, cases started again from the month of July. Kalghatgi, Ron and Mundargi rural circles were more affected. A few cases were also reported from the rural circles of Dharwar, Nawalgund, Gadag and Hangal. Hubli, Karajgi and Bankapur had one death each. Dharwar town claimed 38 deaths. In Satara district 79 deaths were reported from 7 villages in 3 circles of Registration. The majority of deaths occurred in Patan taluka. Shirala

and Khard talukas were also infected though very slightly. In Kanara district 39 deaths were reported from 10 villages in 5 circles of Registration. Haliyal (19 deaths), Sirsi (7) and Yellapur (6) rural circles were affected. Among towns Karwar reported 6 deaths and Kumta one death. In Sholapur and Bijapur districts one solitary death each due to plague was reported. In Sholapur district the death occurred in Sholapur town and in Bijapur district in Indi taluka. In the Central Registration District there were two sporadic deaths due to plague, one being reported from Vengurla town in Ratnagiri district and the other, which was a doubtful case, from Kaharad village in Baglan taluka of Nasik district. The Northern Registration District was totally free from the disease during the year.

88. *Ratting operations.* -Ratting operations were carried out in 23 towns in the Southern Registration District, 10 towns and 7 villages in the Northern Registration District and 18 towns in the Central. In the Province excluding Bombay city 1,027,140 rats were caught and destroyed of which 56,431 rats were examined and 43 were found infected. 28,041 rats were also destroyed by means of poison baiting. The number of rats killed by the Cyanide fumigation is not known. In Bombay city vigorous ratting operations were continued throughout the year and resulted in 703,850 rats being destroyed. 187,187 of these were examined but none was found to be plague infected. In Bombay city trapping, poison baiting, gassing and flooding are employed for the destruction of rats. The daily average number of traps used in the city was 1,561. Plague is primarily a disease of the rats. Their contact with human beings is responsible for the spread of the disease amongst men. Rats have therefore to be destroyed by several methods which is undoubtedly a measure of great value in prevention of plague. Rats can also be kept away from houses either by building rat-proof houses or by denying any food to them in the house. It is not often realised that the methods of dealing with epidemics have to be adopted to suit different circumstances and it is worst than dogmatic to advocate only one method. To build rat-proof houses everywhere or to expect people to be so scrupulous as not to have even a scrap of food in their houses is impossible. Destruction of rats with the object of keeping down the rat population is the next method. For this purpose the old methods of trapping and baiting have to be supplemented by other more effective methods wherever possible. Government have been carrying out Cyanide fumigation operations in several villages in the endemic areas of the Province and they are intended to serve as demonstrations for the local bodies who may be persuaded to adopt this measure. The experience gained has proved the value of this method as a plague preventive measure and it is recommended with confidence to the local authorities.

89. *Anti-plague measures.*—As plague incidence was very mild during the year the services of special medical officers were not required on inoculation duty.

Anti-plague workers were entertained by the District Local Boards of Belgaum, Satara and Sholapur. These workers disinfected 2,400 houses and laid baits in 115,880 houses in the infected villages. 1,373,664 baits were laid of which 677,880 were consumed and 23,088 dead rats were found. In Dharwar district the operations were carried out by the sanitary staff in 106 villages. A special Sanitary Inspector and six anti-epidemic workers were engaged by the District Local Board, Satara, during the year. A grant was sanctioned to the District Local Board, Kaira, for plague preventive measures in the villages of Borsad taluka to the extent of half the amount spent by the District Local Board and not exceeding Rs. 3,285 during the year. A qualified Sanitary Inspector with the necessary staff was appointed from 30th October 1937. Six villages were attended to by the staff and 17,033 rats were destroyed. The operations are progressing.

Cyanogas and Calcid operations.—Government provided Rs. 11,250 for Cyanide fumigation in the endemic plague areas in the Province. The operations were continued in the rural areas of Dharwar, Belgaum and Satara districts under the supervision of Dr. S. H. Kamat, M.B.B.S., D.Hy. Three subordinate medical officers were appointed to work under him. In rainy season the work was suspended and was recommenced from the end of September under the supervision of Captain P. N. Sathye, D.P.H., A.I.R.O., with 5 subordinate medical officers under him. The Epidemic Medical Officer, Kanara district, carried out fumigation in the affected villages in Haliyal taluka. The total work done in all the districts was 199,253 rat holes were fumigated in 11,779 houses in the plague-affected and threatened villages. The District Local Board, Belgaum, and the Municipality of Dharwar also carried out Cyanide fumigation in their respective areas. After fumigation baiting was done to ascertain whether rats were still present in the fumigated houses. As conditions for fumigating the whole houses were not favourable, only burrows were treated. In Borsad taluka of Kaira district Calcid operations started in the previous year were continued up to the middle of February. A Medical Officer with a squad of four coolies was appointed. Five villages were attended to and 3,165 rat holes in 641 houses were fumigated during the period.

Inoculation.—The total number of persons inoculated during the year under report was 62,271 as compared with 41,738 in 1936. These were performed by Medical Officers in charge of Hospitals and Dispensaries, Epidemic Medical Officers and private practitioners. The number of inoculations performed in the districts was—Belgaum 31,206, Dharwar 25,043, Kanara 4,680, Sholapur 512, Bijapur 442 and Satara 388. Owing to low incidence of plague, the grants made by Government were expended mainly on inter-epidemic measures. Rs. 10,337

were spent on Cyanide fumigation. Rs. 1,571 were spent on the purchase of plague vaccine during the year, and vaccine worth Rs. 275 was kept in the Director of Public Health's office as an emergent stock.

The following table shows the number of inoculations performed during the last few years and its ratio to the number of plague deaths :—

Year.	Number of attacks of plague.	Number of deaths from plague.	Number of inoculations.	Number of doses of plague vaccine issued within the Province.	Ratio of inoculations to number of deaths.
1928 ..	19,583	13,563	132,340	255,789	9·7 to 1
1929 ..	27,850	18,014	295,544	347,920	16·4 to 1
1930 ..	7,796	5,026	109,400	123,206	21·7 to 1
1931 ..	5,481	3,506	74,288	107,333	21·2 to 1
1932 ..	21,861	14,446	246,146	272,510	17·1 to 1
1933 ..	35,664	24,560	559,723	597,946	22·8 to 1
1934 ..	20,020	13,307	276,375	299,208	20·8 to 1
1935 ..	4,070	2,453	113,418	113,567	35·7 to 1
1936 ..	875	578	41,738	61,678	72·2 to 1
1937 ..	781	506	62,271	125,136	123·06 to 1

Immunization by plague vaccine which was first introduced by Haffkine is a measure of emergency. Its value for protection has been proved scientifically. Apart from the scientific or statistical investigation the experience of the public as to its efficacy is so great that inoculation is resorted to readily on the appearance of the first case of plague. Instances of whole villages being inoculated in one day are known to the people who live in the endemic areas. The statistics in the above table are sufficient proof for the popularity of inoculation. The increased percentage of inoculation is no doubt due to the confidence of the people in its protective value. The vaccine used is prepared by the Haffkine Institute, Bombay, and is giving entire satisfaction as regards quality and potency.

Influenza.

90. There were 153 deaths from influenza during the year as against 155 in 1936. Bombay city recorded 65 deaths against 70 in the preceding year.

91. *Deaths from influenza in previous years.*—The following table shows the number of deaths from influenza since its appearance :—

Year.	Number of deaths	Year	Number of deaths
1918	859,021	1928	183
1919	38,778	1929	268
1920	16,138	1930	177
1921	3,342	1931	235
1922	1,094	1932	165
1923	954	1933	201
1924	489	1934	315
1925	162	1935	169
1926	342	1936	155
1927	252	1937	153

The disease now prevalent is only of a mild type as compared with the early years of its introduction.

92. *Brief history of influenza outbreak in the Registration Districts and Collectorates.*—The Central Registration District recorded 48 deaths, the Southern Registration District 31 and the Northern 9 deaths. Of the 48 deaths recorded in the Central Registration District 37 occurred in the rural areas and 11 in urban areas. Among rural areas the highest number of deaths (21) were reported from Nasik District. Among towns 4 deaths occurred in Poona city. In the Southern Registration District 23 deaths occurred, the highest (10) being reported from Belgaum District. Eight deaths occurred in the urban area, Hubli town leading with 5 deaths. In the Northern Registration District one death was reported from the rural area and the 7 from urban areas. Dohad town had 4 deaths and Ahmedabad 2 deaths.

In Bombay city the disease was mainly of a mild respiratory type. The patients were advised to avail themselves of the medical relief offered at the Municipal Dispensaries and Hospitals.

CHAPTER V.

Fairs and Festivals.

93. *Pandharpur.*—The chief day of the Ashadhi Fair fell on 19th July 1937. The total number of pilgrims that attended the fair was 159,777 as against 91,261 in 1936. The amount of tax collected was Rs. 38,941 and there were about 4,013 exemptions. In June 1937 cholera

was raging in Satara District and infection had also started in East Khandesh, Sholapur and Poona districts. In Nasik and Ahmednagar districts the disease was also prevalent. The route of the Palkhis lay through the cholera-infected tracts in these districts and there was every possibility that movements of the pilgrims would spread the infection throughout the districts from which persons proceeded to Pandharpur. On the recommendation of this Department supported by the Commissioner, Central Division, Government issued a notification on 18th June 1937 applying the Epidemic Diseases Act to Pandharpur and ordered that non-inoculated people should be prohibited from entering Pandharpur during the Ashadhi fair. Arrangements were consequently made for free inoculation and offer of certificates to the pilgrims who did not come with certificates of previous inoculation. Similarly all the District Local Boards and Municipalities were requested to give facilities for inoculation against cholera to the intending pilgrims at least 10 days before they left their town or village. The Director of Public Health, Central Provinces, and the Director, Medical and Sanitation Department, His Exalted Highness the Nizam's Dominions, were also requested to make similar arrangements. As regards the followers of Palkhis who form the bulk of the visitors to Pandharpur, the three important Palkhis viz., Shri Nivrittinath, Shri Dnyaneshwar and Shri Tukaram were as usual accompanied by medical officers. Medical officers were also appointed to accompany Shri Laxmi Narayan, Shri Sopandeo and Shri Muktabai Ram Palkhis. All the Medical Officers were asked to perform inoculations among the pilgrims en route. Palkhis which were not accompanied by medical officers were inspected en route by Dispensary Medical Officers and most of them were met by medical officers especially appointed as soon as they entered Sholapur District and inoculations were performed among their followers. Inoculation was started from 13th July 1937 by appointing 46 medical practitioners at different nakas of Pandharpur and the Railway station. As it was found difficult for them to cope with the work the services of 5 Epidemic Medical Officers were requisitioned. In all 116,367 pilgrims out of 159,777 were inoculated; the majority of the remaining 43,410 arrived with certificates of previous inoculation. Nearly 5,110 residents at Pandharpur town also got themselves inoculated.

The total number of Palkhis that arrived at Pandharpur was 20 which is the same number as during the year 1936. All the Palkhis arrived at Wakhari, the last camp before entering Pandharpur, on the evening of 18th July 1937. Necessary sanitary arrangements were made by the G. I. P. Railway for pilgrims arriving at Kurduwadi station. The Civil Surgeon, Sholapur, made the usual medical and sanitary arrangements at Kurduwadi village.

Arrangements at Wakhari.—The followers of the Palkhis were supplied with chlorinated water. Shallow trenches were also provided. The sanitary arrangements were looked after by the Sanitary Inspector, Pandharpur Municipality. An emergency hospital with necessary staff and equipment was opened as usual.

Arrangements at Pandharpur.—The usual medical arrangements were ready well before the pilgrims began to arrive. Twenty-two doctors were posted at the station for the medical inspection and inoculation of pilgrims. 23 inoculators assisted by medical students were on duty at the various nakas and one in the town.

Health of Pilgrims.—One case of cholera and 3 of diarrhœa were admitted into the Hospital. The persons admitted in the Hospital were detected either before entering the town or soon after their entry. The spread of infection was thus effectually prevented.

Temple arrangements —124,261 pilgrims took Darshan through Baris as against 91,818 in 1936.

Other Fairs.—The principal day of the Kartiki festival at Alandi fell on the 28th November 1937. The sanitary arrangements which were supervised by the Assistant Director of Public Health, Central Registration District, were satisfactory. The fair passed off with a clean bill of health. The principal fairs at Nasik and Trimbak were Nivritti in February and Ramnavami in April 1937. The sanitary arrangements made at these fairs at Nasik and Trimbak were adequate. There was one case of cholera after the Nivritti fair at Trimbak was over. Of the four different fairs at Saundatti-Yellamma, the one in February 1937 was an important fair when about 80,000 to 90,000 pilgrims gathered. The Mahashivaratri fair at Gokarn was held in March 1937 attracting about 15,000 pilgrims. The fair at Yamnur was held from 28th March to 5th April 1937, the number of pilgrims being about 50,000. The sanitary arrangements at the fair at Shingnapur were inspected by the Assistant Director of Public Health, Southern Registration District. The fair at Shirala was stopped by the District Magistrate in view of the prevalence of cholera in different parts of Satara District. The festival at Shukaltirth in Broach Taluka fell on 18th November 1937 and was attended by about 50,000 pilgrims. The Kartiki Punem fair at Vautha was held on 18th November where about 100,000 people congregated. The Manekthari Punem fair at Dakor which is the biggest of the 14 fairs at the place came off in the month of Ashwin. The sanitary arrangements suggested by the Assistant Director of Public Health were carried out by the Municipality.

CHAPTER VI.

Urban Sanitation.

94. *Classification of Municipalities.*—There are 130 Municipalities in the Province; of these excluding the Bombay Municipality, Ahmedabad, Nadiad, Broach, Surat, Thana, Bandra, Ahmednagar, Jalgaon, Bhusaval, Amalner, Chalisgaon, Dhulia, Nasik, Poona City, Poona Suburban, Lonavla, Satara, Sholapur, Pandharpur, Belgaum,

Bijapur, Dharwar, Hubli, Gadag-Betgeri, Barsi and Ratnagiri are Borough Municipalities; Viramgaum, Godhra, Bagalkot, Malegaon, Yeola and Guledgud are city municipalities and the rest are District municipalities. Population of these municipal towns varies from 114 to 382,757.

95. *Number of Medical Officers of Health.*—During the year under report Medical Officers of Health having British Diploma in Public Health were employed in Ahmedabad, Surat, Poona, Sholapur, Pandharpur, Nasik and Hubli. The Ahmedabad Municipality maintains a qualified Deputy Health Officer. Health Officers holding the medical degree of the Bombay University in addition to the Sanitary Inspectors' certificate and the B.Hy. (Bom.) were employed at Broach, Bandra and Ahmednagar. Bijapur employed a Health Officer holding the medical degree of the Bombay University plus Junior Health Officer's Examination certificate. Jalgaon, Dhulia and Kurla had Health Officers possessing the diploma of the College of Physicians and Surgeons and the Junior Health Officers' Examination certificate while Dakore employed a Licentiate of the College of Physicians and Surgeons holding Sanitary Inspectors' Certificate.

96. *Number of Sanitary Inspectors.*—Ninety-three qualified Sanitary Inspectors were employed in 46 towns. Ahmedabad 15, Poona 9, Sholapur 8, Surat 6, Hubli 3 and Ahmednagar, Broach, Belgaum, Bijapur, Barsi, Dhulia, Gadag, Nasik, Pandharpur, Bandra and Bagalkot 2 each, and the following had one each: Rander, Bulsar, Godhra, Viramgaum, Dholka, Amalner, Bhusawal, Chalisgaon, Chopda, Nandurbar, Thana, Malegaon, Manmad, Trimbak, Ghatkopar, Igatpuri, Kalyan, Poona Suburban, Kurla, Mahableshwar, Saundatti, Dharwar, Ranebennur, Haliyal, Satara, Panchgani, Dohad, Jalgaon, Anand and Kapadvanj.

97. *Municipal Sanitary Works.*—The total population of all municipalities excluding Bombay is 2,645,509. Their total income excluding opening balance for the year 1936–37 was Rs. 1,89,78,784 of which Rs. 1,47,64,030 or 77·79 per cent. was raised by taxation, giving an incidence per head of population of Rs. 5-9-4. Taxation varied between Rs. 16-7-5 in Matheran and Re. 0-5-0 in the Municipality of Ashta in Satara District. These figures include a special conservancy cess in the case of many Municipalities.

The incidence of municipal income and taxation per head of population in the larger municipalities is as follows:—

	Income.	Taxation.
	Rs.	Rs.
Bombay	27	22
Ahmedabad	13	11
Poona	10	8
Surat	7	6
Sholapur	7	6

During the year complete sanitary surveys of 8 towns were made and in addition 46 towns were visited for special inspection or reports. Advice was given in all these and in numerous other cases in matters of water supply, conservancy, prevention or spread of disease and in measures of a more general nature. Action was taken by many of the Municipalities on the suggestions of the Assistant Directors of Public Health of which the following is a brief summary :—

Borsad and Umreth constructed metalled roads. Belgaum, Hubli Gadag, Byadgi, Bijapur, Satara, Kaira, Godhra, Sanand and Amalner constructed and repaired latrines. Gokak, Gadag, Satara and Umreth constructed urinals. Dharwar, Byadgi, Bagalkot, Guledgud, Satara, Mahableshwar, Sangola, Chopda, Jalgaon, Chalisgaon, Dharangaon, Erandol, Parola and Nandurbar constructed gutters. Belgaum, Panchgani, Wai, Sholapur and Bhusawal constructed surface drains. Karwar spent Rs. 1,683 on drainage. Ahmedabad has been making particular efforts for the improvements of chawls and the abolition of sand and hand cleansed panch privies. Water works were constructed by digging a well in Chopda town and water from this well is pumped out into a storage tank from where it is distributed through the pipes into the city. Hydrants are placed at different localities and roads and drains cleaned by means of these hydrants. The Municipality spent nearly Rs. 6,000 for the same. The Nasik system of trenching night-soil has been adopted by Surat, Bulsar, Broach, Dakor, Godhra, Erandol, Chalisgaon, Bhusawal, Chopda, Parola, Nandurbar and Dhulia Municipalities. This system has proved a success in all the above towns though with exception of Jalgaon, Bhusawal and Dakor the realization from the sale proceeds was not adequate to meet the cost of the system. Mehmedabad Municipality is trying the compost method of disposing night-soil.

98. *Expenditure on Public Health in Municipalities.*—The expenditure on public health measures came to Rs. 3–12–0 approximately per head of population in Ahmedabad City and averaged about Rs. 2–2–6 for all the remaining Municipalities.

99. *Municipal water supplies.*—The municipal water supplies at Ahmedabad, Surat, Kapadwanj, Dhulia, Nandurbar, Bijapur, Hubli, Nasik, Poona and Sholapur were regularly sterilized and generally they maintained their standard of purity.

100. *Infectious Diseases Hospitals.*—The Infectious Diseases Hospital, Poona, admitted 331 patients of which 66 died. The largest number of admissions for any single disease was 48 on account of tetanus. There was one case each of conjunctivitis, encephalitis, and psoriasis.

An Infectious Diseases Hospital was opened at Pandharpur at the time of the Ashadhi Fair which was held from 15th to 24th July 1937. One case of cholera and 3 of diarrhœa were admitted into the hospital during the fair period.

101. *Action taken by Municipalities under Municipal Acts and bye-laws.*—Thirty-four Municipalities issued 8,579 notices under different

bye-laws pertaining to Public Health matters of which 6,290 were complied with. 4,145 prosecutions were launched and 3,051 convictions were obtained. Prosecutions in case of 285 notices were withdrawn.

As regards the enforcement of the Section in the Bombay Municipal Boroughs Act for the control of nuisance from stables the Administrator, Kurla Municipality, in his Annual Report, remarks, "Sometimes the courts do not see eye to eye with the policy of the Municipality and so they inflict light fines which do not count with the stable owners who can pay them off and still carry on in a defiant manner. What is required in such cases is an equal amount of hardening of the heart on the part of the courts, in the absence of which action taken by the Municipal Administration will not be very effective. The section 178 of the Bombay Municipal Boroughs Act is very clear and says 'No licence, no stables". The nuisance arising from the milch cattle stables is increasing in the Bombay Suburban District on account of the cheapness of construction. The local bodies in this area do not always exercise the powers which they possess, in fact it may be said that local bodies following a consistent policy for abating this nuisance are an exception rather than the rule. In addition the powers of certain local bodies are found to be inadequate. The owners thus find it cheaper to construct stables in the Suburban area than in Bombay City where they have to comply with more stringent bye-laws.

CHAPTER VII.

Rural Sanitation.

102. *District Health Officers.*—No new District Health Officers were appointed during the year. Only two Districts, i.e. Satara and Dharwar, have District Health Officers.

103. *Epidemic Medical Officers.*—There was no permanent staff of Subordinate Medical Service Officers in the Public Health Department. All medical officers required for epidemic duty had to be engaged temporarily. On this account there used to be considerable delay in sending extra help to the infected villages. Difficulty was also experienced in obtaining Medical Officers for anti-malaria work; they had to be given preliminary training every year and as there were no prospects of permanent employment many of them did their work half-heartedly. With a view to overcome these difficulties and to provide for more systematic inspection of sanitation of villages Government created in November 1936 a new service of Epidemic Medical Officers. Ten posts were sanctioned and they were filled in 1937.

The duties of these officers are.—Epidemics, fairs, palkhis, malaria and water supply. When not employed on these duties they are made available in connection with rural sanitation, hygiene and health welfare. When not employed on suppression of epidemics they are given an area for survey of malaria and other health problems.

104. *Land acquisition in villages for relieving overcrowding.*—Progress in this direction may be summarised as under :—

Dharwar.—Seven acres and 9 gunthas and 3 acres and 12 gunthas of land were acquired for the village sites of Hosritti in Haveri Taluka and Wardi in Hangal Taluka respectively.

Ahmedabad.—Two Survey Nos. 196 and 199 of Narol village in South Daskroi Taluka were acquired at the cost of the villagers of Shahwadi for providing a better and suitable village site for them as their lands and houses were acquired by the Ahmedabad Municipality for the extension of the sewage farm.

Ratnagiri.—The local revenue officers have helped in relieving overcrowding, improving general sanitation and attending to village planning, in constructing new houses on model lines at Dewache-Gotham in Rajapur Taluka, a hamlet consisting of 28 houses, which was gutted by fire in March 1937. The people were persuaded to secure new site and build houses on the lines of village planning.

105. *Village Water Supply.*—Government placed in September 1937 at the disposal of the Commissioners of Divisions the following grants for improvement of village water supply :—

	Rs.
Northern Division	3,50,000
Central Division	1,50,000
Southern Division	2,00,000
Reserve with Government	3,00,000
Total ..	10,00,000

The expenditure of the allotted grants on approved works is not conditional as before on the receipt of contributions equal to $\frac{1}{3}$ of the cost of each work from the local board and villages combined.

Seven hundred and eighty-seven new draw wells were constructed during the year. Eighty-two step wells were converted into draw wells.

106. *District and Taluka Local Boards.*—The aggregate income of 20 District Local Boards and 159 Taluka Local Boards during 1936–37 amounted to Rs. 1,63,90,966. Income and taxation per head of population was Rs. 1–2–5 and Re. 0–4–2 respectively against Rs. 1–2–1 and Re. 0–4–9 in 1936. A total sum of Rs. 19,50,264 was spent by the Boards on communications while Rs. 6,71,334 were spent under the head of Public Health Works.

Government placed at the disposal of the Commissioners the following grants for distribution among District Local Boards of the Province. These grants are intended to be utilized primarily for expenditure for roads and buildings—

	Rs.
Northern Division	2,18,800
Central Division	3,50,400
Southern Division	2,01,800

107. *Village Sanitary Boards.*—The only Sanitary Board in the Bombay Province at Siddapur in Kanara District constructed a well and a road and did usual conservancy work during the year.

108. *Sanitary Committees and Village Panchayats.*—During the year one hundred and sixty Sanitary Committees and 522 Village Panchayats were reported to be functioning. The Assistant Directors of Public Health during their tours inspected sanitary arrangements of the villages where Committees and Panchayats existed and their recommendations were forwarded to the Revenue Officers. Examples of useful work done by Village Panchayats are given below :—

Anturli, Chorwad and Adgaon purchased rat traps. Vanthwali, Mehlaj and Nyahalod stored manure outside the village. Asode, Salve, Pimpalner and Koperli constructed trench latrines. Nasirabad, Nagardeole, Bodwad, Purmapada, Nardana, Mundargi and Bedag constructed gutters. Edlabad and Vadode improved conservancy arrangements. Mehunbare, Songir, Kasare, Nizampur and Koregaon constructed new latrines and repaired old ones. Ranale Kukurmunda, Dondaicha, Alnavar, Kalghatgi, Banwashi and Mundgod constructed wells.

109. *Village Improvement Scheme.*—Village uplift work is being done under the auspices of the District Village Improvement Committees which are functioning in all the districts. The Assistant Directors of Public Health attended meetings of these Committees and helped them with their advice. The Assistant Director of the Public Health, Southern Registration District attended the meeting of the District Executive Committee of the Village Improvement Association in Belgaum. In ten villages visited by him, village improvement work such as construction of roads, disposal of refuse by tight heap method, improvement to roads was suggested. The Inspectors of Sanitation and Vaccination during the course of their tours delivered lectures to the villagers on general sanitation, personal hygiene, etc. They accompanied the Villge Uplift Vans during their tour and lectured on rural sanitation and hygiene. The Inspector of Sanitation and Vaccination, Nasik, Northern Division, gave lectures on epidemic diseases and general sanitation in 22 villages. The Inspector of Sanitation and Vaccination, Nasik, Southern Division, gave 12 demonstrations. The Vaccinators as usual impressed upon the villagers the necessity of getting their children vaccinated. The following is a resume of the improvement work in villages in different districts during the year :—

Satara.—Cleaning days were observed periodically in many villages. Many manure heaps have been removed from gaothan and stored in pits outside. About 602 pits have been made outside the gaothans in the talukas of Koregaon, Wai, Khatav and Patan. The Village Improvement Committees are making full use of the medicine chests provided by the District Local Board.

The villagers of Khanapur, Ladegaon and Wadi in Khatav Taluka converted a step well into a draw well. The Village Improvement

Committee, Gundewadi has excavated "hels" by the side of the brooks and kept them open to all castes alike. About 45 step wells have been converted into draw wells in Patan Taluka. In most villages water sources were disinfected with potassium permanganate. Roads and roadside gutters have been repaired in about 135 villages.

Dharwar.—In 18 villages, manure pits have been removed outside the Gaothan and 585 manure pits have been excavated on improved lines. Steps have been taken to keep public wells, tanks and public places clean. About 45 medicine chests, which were distributed in selected villages, have been replenished. Nearly 30,000 patients have received treatment.

Nasik.—The digging of manure pits is spreading. A number of trench and pit latrines have been constructed. The Malegaon Medical Relief Association which is in good progress treated nearly 7,000 patients. Good many children were treated by the Infant Welfare Association. Dais and teachers are trained in medical knowledge in the Civil Hospital, Nasik, at the expense of Government. Some dais are appointed at villages at the expense of the Village Improvement Committee to render free help to the poor.

Surat.—Manure heaps were removed to a greater distance from the dwelling places. The work of filling up the pits and puddles around the wells is done in many villages. Much propaganda work is being done to popularise the use of bore hole latrines and for this five earth-augers have been supplied to the different talukas. During the year nineteen village dais received training at the Maternity Homes at Navsari and Surat. Propaganda work is being carried out by way of holding magic lantern shows and lectures.

Kanara.—Removal of rubbish was done in many villages. Cattle sheds and manure pits were removed to a distance from the habitation. The drinking water supply has been disinfected by almost all the Village Improvement Committees in Sirsi, Siddapur, Kumta, Honavar and Haliyal Talukas. Three women from Karwar Taluka, three from Yellapur Taluka and one from Sirsi Taluka received training as village dais.

Poona.—Latrines were constructed at Kodit Budruk, Kodit Khurd, Bopodi and Hadapsar. Medicine chests have been kept at Hadapsar, Loni Kalbhor, Fursungi and Mundhwa for the use of villagers. The villages of Dhonde, and Jaulke Budruk, have dug pits outside gaothan area to store rubbish. The gaothan area of the villages of Wada, Bibi, Kolinde Budruk, and Shive was cleaned and rubbish was removed outside the villages. Attention is being paid to the improvement of water supply.

Bombay Suburban.—During the year 65 maternity cases were attended to by the midwife of the Local Board Charitable Dispensary at Andheri and of these 40 were treated free. Steps were taken to disinfect the sources of drinking water.

Sholapur.—The Village Improvement Committee organised a Health Week in a number of villages during the Nawaratra. A number of lantern lectures were arranged during the course of the tour of the Publicity Van.

Ahmedabad.—In many villages steps are taken to remove manure heaps from the village site land to pits dug for the purpose away from the inhabited areas. The roads and streets are kept clean and in some villages like Bareja, Aslalela and Kali lighting arrangements have been made. A qualified nurse has been posted at Sanand who attends labour cases and trains Dais for the purpose.

Thana.—A health visiting nurse maintained by S. P. Hakimji Maternity Home at Gholwad visited 876 children of whom 221 were given milk from the home. A Baby Week Show was arranged at Bassein during May 1937 with the help of the Bombay Presidency Baby and Health Week Association. The Bhayandar Committee engaged scavengers for scavenging work. Gutters have been dug in the villages in Bassein and Bhiwandi Talukas to drain away water likely to accumulate in the village gaothan.

Kolaba.—The Village Panchayat, Medhe constructed three culverts at a cost of Rs. 54 and the Village Panchayat, Nagothana, constructed a gutter at a cost of Rs. 334-14-0. Dams were constructed in a number of villages. It is encouraging to find that everywhere the question of water supply is being taken up in earnest by villages in a spirit of self-help. The campaign against guinea-worm is one of the most important features of the Village Improvement Scheme. Cochineal insects have been introduced in several villages in Alibag Taluka and Uran Mahal for the eradication of prickly pear.

Bijapur.—A number of villages in different talukas removed manure pits from the village site. Fifty agriculturist families erected separate sheds for their cattle. Cleaning and sweeping the front portions of the houses has become widespread. Cesspools were newly constructed in 38 villages. Disinfection of water sources with potash permanganate has become a regular feature.

Ratnagiri.—Magic lantern lectures on village improvement were given by Mr. Phalanikar at Kodawali in Rajapur Taluka which were much appreciated by the villagers assembled. The Village Improvement Committee, Visapur (Dapoli) has constructed six dams across the village river. A new public well has been constructed by the villagers of Tulshi (Mandangad) with voluntary labour. The Village Improvement Committee, Pimper, in Guhagar Peta repaired a public well by voluntary labour.

Ahmednagar.—Owing to the suspension of the village improvement work, due to the scarcity prevalent throughout the district, no work of any appreciable nature was done during the year. Works which were previously approved and for which grants were allotted were carried on. Fifteen dais were trained under the supervision of the Civil Surgeon at the Seva Sadan Branch, Ahmednagar, and the Civil Hospital, Ahmednagar.

Belgaum.—Wells and sources of water supply are disinfected with drug. Cleaning of houses and their surroundings and open spaces and roads in all the selected villages is done at regular intervals. Work of gutters is also noteworthy. The propaganda work of the rural uplift van is satisfactory. Bore hole latrines are gaining popularity.

West Khandesh.—It has now become common in many villages to store manure in pits, especially dug for the purpose, outside the gaothan and even in the Nawapur Mahal, which is populated very largely by Bhils, the number of manure pits has increased from 1,500 to 2,500. The use of bore hole latrines is being encouraged. The work of attending to the sanitation in villages is being pushed on. Wherever possible the digging of kutcha gutters and repairs to roads in villages have been encouraged. The Village Panchayat, Waghadi in Shirpur Taluka constructed pucca latrines of four seats costing Rs. 200. The Village Panchayats, Kasare, Nizampur, Pimpalner constructed latrines for women.

CHAPTER VIII.

Malaria.

110. During the year 25,373 deaths from malaria were recorded against 27,307 in 1936. The death-rate from malaria for the Province was 1·41 as against 1·52 in the previous year. The urban and rural death-rates were ·54 and 1·63 as compared with ·48 and 1·78 in the previous year.

111. *Deaths from Malaria in the Province.*—The Central Registration District recorded the largest number of deaths 14,784, the Southern 5,594 and the Northern 4,923. Bombay city recorded 72 deaths against 89 in 1936.

112. *Deaths from Malaria in Collectorates.*—The larger number of deaths from malaria were recorded in the Collectorates of Nasik 6,117, Poona 3,987, West Khandesh 2,533, Thana 2,018, Dharwar 1,882, Ahmednagar 1,783, East Khandesh 1,540, Belgaum 1,469 and Kanara 867. The ratios of death per 1,000 population are also in the same order except for Kanara which on account of smaller population records higher ratio than Dharwar, Ahmednagar, East Khandesh and Belgaum.

113. *Relation of deaths from Malaria to deaths from Fevers.*—During the year under report 164,130 deaths from Fevers were recorded out of

which 25,373 were attributed to Malaria, the percentage of deaths from Malaria to those from Fevers was 15 as compared with 17 in 1936.

114. *Seasonal Mortality of Malaria.*—The highest number of deaths from Malaria (3,135) was recorded in the month of December and the lowest (1,282) in June from which month a progressive increase is noticeable. The downward curve from January to June is also almost progressive. During the first period 13,229 deaths occurred and during the latter the number of deaths was 12,144.

115. *Deaths from Malaria in urban and rural areas.*—High death-rates from Malaria in urban areas were recorded in the towns of Poona city (3·64), Trimbak (3·46), Ahmednagar Cantonment (2·51), Nasik (2·38), Malegaon (2·37), Bhiwandi (2·24), Igatpuri (2·18), Surat (2·14), Dakore (1·65) and Nandurbar (1·48) and in rural areas in the districts of Nasik (6·77), Poona (3·70), West Khandesh (3·64), Thana (2·57), Kanara (2·34), Dharwar (1·90) and Ahmednagar (1·86).

116. *Anti-malaria measures and touring Medical Officers on Malaria duty.*—For the malaria season 44 subordinate medical service officers were appointed by the Director of Public Health for the Government of Bombay to visit the villages in the most malarious parts of the Province and to treat cases of fevers found in them. Their services were also utilized in emergencies in cholera outbreaks to carry out inoculation and other anti-epidemic measures in their areas. They visited 5,301 villages, treated 98,304 persons for malaria and 66,190 for other diseases and examined 1,33,717 persons for enlarged spleens out of which 36,434 were found to have enlarged spleen (27 per cent.). The anti-malaria medical officers worked under the supervision and instructions of the Assistant Directors of Public Health who also visited the malarious parts in their charge for investigations and suggested measures.

In the Central Registration District 203,500 five-grain tablets and 261,500 two-grain tablets of quinine were distributed free by the special Medical Officers and the Inspectors of Sanitation and Vaccination and Vaccinators. Besides, the Revenue Authorities, District School Boards and Red Cross Society were supplied with 346,350 five-grain and 510,600 two-grain tablets for distribution. The Medical Officers in charge Municipal Charitable Dispensaries in Poona city treated 14,482 malaria patients during the year. The Medical Officers in charge Dispensary of the Yeravda Industrial School treated 192 inmates for malaria. In all 115,403 persons were treated for malaria in Hospitals and Dispensaries in the Central Registration District during the year. Twenty medical officers were appointed on anti-malaria duty in the six districts of the Central Registration District for varying periods during the year. The work of the anti-malaria squad at the Mental Hospital, Thana, was satisfactory. The anti-malaria work in this Mental Hospital is responsible along with improvements in other sanitary matters for the marked decrease in the death-rate which was 16·2 in 1934 when the improvements were suggested and came down to 12·4 in 1937.

In the Southern Registration District 272,900 five-grain and 264,900 two-grain quinine tablets were supplied to different agencies for free distribution. Also 104,322 and 37,300 tablets of five and two grains respectively were supplied to different officers including Inspectors of Sanitation and Vaccination, Vaccinators and School Masters for free distribution. Repairs to drains and construction of new drains were carried out in 14 towns to avoid stagnation of water. Anti-malaria measures were carried out by Bijapur, Bhatkal, Karwar and Sholapur Municipalities which included oiling of cesspools and tanks, filling in low lying plots, etc. Thirteen medical officers were appointed for anti-malaria duty in the Southern Registration District.

In the Northern Registration District 386,500 five-grain and 603,100 two-grain tablets of quinine were distributed free by the medical officers and the vaccination staff. Besides, the Revenue Authorities, District School Boards, Sanitary Associations and Red Cross Societies were supplied with 177,130 five-grain and 329,330 two-grain tablets for distribution. A special malaria staff consisting of four Sanitary Inspectors and 20 coolies was engaged by the Ahmedabad Municipality for carrying out anti-malaria duties. In Surat town one mukadam and 8 coolies were engaged for similar work. In Bulsar, Kaira, Dholka and Bhusawal towns anti-malaria measures were attended to by the Municipalities. 177,866 cases of malaria were treated in the Civil Hospitals and Dispensaries in the Northern Registration District. Eleven special medical officers were appointed on anti-malaria duty in the Northern Registration District during the year.

117. *Distribution of quinine.*—During the period under report Government sanctioned (1) Rs. 18,525 for free distribution, (2) Rs. 19,500 for sale at Post Offices and (3) Rs. 3,900 for sale of quinine hydrochloride treatments for the Province of Bombay.

Under the first grant increased by additional grant, Rs. 21,242 were spent on purchase and manufacture of quinine tablets for free distribution. Quinine worth Rs. 21,041 was distributed free to the public through Revenue and other officials and the Administrative Officers of District School Boards. Some of the quinine was also distributed by the Assistant Directors of Public Health, Inspectors of Sanitation and Vaccination and selected Vaccinators. Under the second grant, increased by an additional grant, Rs. 37,995 were spent in supplying quinine tablets for sale at Post Offices and to certain officials and institutions on payment. The Superintendent, Yeravda Central Prison, credited a total amount of Rs. 35,413 realised from the sale during 1937–38 and collection of arrears for previous years, into Government Treasuries. Under the third grant, increased by an additional grant, Rs. 3,814 were spent in preparing and supplying quinine hydrochloride tablets in the form of treatments. The amount realised by sale of treatments including arrears amounted to Rs. 5,076.

The distribution of free quinine through School Boards and through Assistant Directors of Public Health and Collectors by districts was as under :—

Serial No.	District.	School Boards.	Assistant Directors and Collectors.	Remarks.
		Rs.	Rs.	
1	East Khandesh	65	399	
2	West Khandesh	203	334	
3	Surat	144	337	
4	Broach and Panch Mahals ..	203	689	
5	Kaira	158	750	
6	Ahmedabad	144	4,622*	
7	Ahmednagar	11	100	
8	Poona	422	2,575*	
9	Nasik	108	617	
10	Thana	315	1,674	
11	Bombay Suburban ..	72	34	
12	Kolaba	113	76	
13	Ratnagiri	29	103	
14	Belgaum	..	3,104*	
15	Dharwar	551	719	
16	Bijapur	..	201	
17	Kanara	1,119	856	
18	Sholapur	..	..	
19	Satara	..	194	
	Total for the Province ..	3,657	17,384	

*Includes supply to Assistant Director for his Registration District.

Besides this, 659 lbs. of the Government of India quinine, out of 3,270 lbs. received as a free gift for this Province, was distributed

through Collectors and Assistant Directors in addition to the normal stock, during the period under report, quantities being allotted to each district according to population and severity of malaria therein.

118. *Special enquiries and investigations.*—As per recommendations made by this Department the Pandharpur Municipality has started an investigation into the incidence of malaria in the town. Dr. D. W. Soman, D.P.H., has been specially appointed for the enquiry which is progressing.

A survey of malaria in the urban area of Poona and in certain rural areas adjoining it was carried out by Dr. M. A. Barber, M.D., D.P.H., and Dr. J. B. Rice, M.D., D.P.H., of the Rockefeller Foundation, during the dry season of 1937 and the early weeks of the rains. Malaria indices in the urban area were generally found to be low except in the neighbourhood of one of the rivers which traverse the city. Much higher indices were found in rural regions, especially where there is irrigation by canals or streams. Mosquito surveys showed a great variety of species of Anopheles. A. culicifacies is probably the chief vector of malaria. It is the most abundant species, in some localities very plentiful even during the dry season. It is the only species in which the malaria parasites were found and one of the three (culicifacies, subpictus and fluviatilis) in which stomach blood was found human-positive by the precipitin test. A. subpictus showed only one such positive during the entire survey. A. fluviatilis gave a relatively high human positive percentage among the comparatively few examined ; and the species may be an efficient vector in the parts of this region where it is plentiful. Sixteen localities, chiefly situated in the more malarious regions, were twice surveyed, once before the advent of the monsoon and again in the early period of the rains. This comparison showed in the latter period a marked increase in the index of microscopic anæmia, a smaller increase in the parasite index and but little change in the spleen index. It is probable that a significant increase in the activity of the parasites occurred owing, it is believed, to a comparatively abrupt change in the weather.

CHAPTER IX.

Maternity and Child Welfare.

119. *The Lady Wilson Village Maternity Association.*—There are 15 District Branches of the Association in the Province. Out of these, 9 branches trained 106 village dais. The Executive Committee met twice during the year. At its first meeting, the scheme for the secondary training of dais proposed by the Bombay Mofussil Maternity, Child Welfare and Health Council, was considered. The scheme was considered to

be too elaborate for application to village dais. The question of the appointment of a special Lady supervising officer to inspect the work of the dais and to bring about uniformity in the method of work which was taken up at both the meetings was postponed until such time as a complete scheme was drawn up. At the second meeting, grants were allotted to several District Branches. At the Annual General Meeting which was held under the presidentship of the Commissioner, Central Division, due to the absence of Her Excellency, it was decided that the question of amending the Rules of the Association should be taken up at the next meeting. The Central Committee of the Association was abolished and it was decided that its work should be done by the Executive Committee.

120. *Satara Health Association.*—The Association is conducting 6 centres at Panchgani, Wathar, Rahimatpur, Yelur, Tasgaon and Karad. These have been managed under the direction of trained nurses. All the maternity homes and wards in Satara City and in the district are being helped by this Association.

In Belgaum District 3 dais, in Bijapur District 10, in Kanara District 11 and in Satara District 11 were trained in the Civil Hospitals. The Infant Welfare Centre at Belgaum held 33 classes for dais with a total attendance of 153. The Infant Welfare Centre under the Belgaum Branch of the Indian Red Cross Society has now been transferred entirely to the control of the Bombay Mofussil Maternity, Child Welfare and Health Council.

121. *The Bombay Presidency Infant Welfare Society.*—During the year under report, 2,524 women were sent for confinement by the Society's nurses to maternity institutions other than the Homes maintained by the Society. The number of expectant mothers admitted in all centres was 3,104 and the total attendance of expectant mothers to ante-natal clinics 26,097. The Society's nurses visited 7,082 new expectant mothers at their homes. This work is carried out in Bombay city. The share of the Society in this work for the Province excluding Bombay city is represented by a grant of Rs. 7,000 given to the Bombay Mofussil Maternity, Child Welfare and Health Council for the year 1937. As remarked in the report for 1934, this is totally inadequate as it is in the mofussil that the real necessity for maternity and infant welfare lies and not in the city, where it can be very well left to the care of the Municipality.

Eight students in the Health Visitors' Institute completed their year's training and four of these passed.

122. *The Bombay Mofussil Maternity, Child Welfare and Health Council.*—During the year satisfactory progress was made by the opening of five more centres directly as a result of the encouragement of the Council. Six new centres were affiliated to the Council thus making a total of 37 centres which include 3 District Committees of Poona, Satara and Dharwar. Nearly ten of the mofussil centres of the Council are giving training to dais. All the centres in the Province have been visited by the Honorary Adviser. He found that the Committees are doing their work

conscientiously and in the interest of the poor. The Council gave away Rs. 24,233 as grants to mofussil centres for maternity and child welfare work. The total number of cases new and old that were helped or advised by the centres is as follows.

Infants for clinics 103,994, infants for milk 222,879, expectant mothers for clinic 10,924, cases delivered by centre's nurse at patient's house 622 and post-natal cases for clinic 2,573.

657 normal and 120 abnormal cases were treated by the 10 midwives and 1 Ayah entertained by the Dharwar Red Cross Committee.

Twenty-five midwives attached to different institutions in Sholapur city attended 2,712 confinements at the institutions and 117 outside.

All the Societies work in co-operation with the Public Health Department. The Director of Public Health is a member of the Executive Committees or Governing Bodies of most of them. The Assistant Director of Public Health, Central Registration District, is the Honorary Secretary of the Bombay Mofussil Maternity, Child Welfare and Health Council and the Lady Wilson Village Maternity Association. During their regular tours the officers of this Department take the opportunity of advising the local bodies and voluntary organisations the necessity of maternity and child welfare work from time to time.

CHAPTER X.

123. *School Hygiene and Medical Inspection of School Children.*—The scheme of medical inspection of schools remains in abeyance. Schools were visited from time to time during the course of their visits for vaccination work by Vaccinators or inspection thereof by the Inspectors of Sanitation and Vaccination. Besides, the Inspectors took opportunities to give instructions to the school children on personal cleanliness, school hygiene, cholera, plague, vaccination and protection afforded by it against small-pox. 88 schools were visited by the Inspectors during the year. The Assistant Director of Public Health, Southern Registration District, inspected the schools at 7 villages and examined 345 children for spleen census. Of these children 98 were found with enlarged spleen. The Arogya Mandal at Dhulia conducted medical inspection of 650 children in Marathi Municipal schools through four of its medical members.

Instruction in health and hygiene is imparted in Primary schools mainly through the lessons on those subjects contained in the regional languages readers. In Standard VII of Boys' Schools, Physiology and Hygiene are the subjects of the course prescribed for that standard, and at the Final Examination half of the question paper on Hygiene and Elementary Science is related to these subjects. In the standards for Girls' Schools, Hygiene has been included as one of the regular subjects of instruction. In the course of studies in primary training institutions for men, the subjects of " Hygiene and Physiology " and " General Hygiene " have been prescribed for the second year class, while in the training institutions for women, " Physiology " and " Hygiene " have been prescribed for the

first year class and "Domestic Science" for the second year class. Equipped with the knowledge of these subjects, teachers do pay attention to children's cleanliness, correct sitting posture, proper holding of books, etc. Care is also generally taken by the school authorities to see that the school houses are, as far as possible, well lighted and ventilated.

Propaganda work in School Hygiene is done by way of lectures, demonstrations and magic lantern slides. The Visual Instruction branch of the Educational Department also demonstrates occasionally in rural areas the principles of cleanliness and sanitation. Of the various topics dealt with in these illustrated lectures, the subject of health and hygiene forms an important part. Government Inspecting Officers and Supervisors of School Boards also deliver lectures with the aid of the magic lantern on health and hygiene for the benefit of school children and the general public.

CHAPTER XI.

Health Propaganda.

124. *The Bombay Presidency Baby and Health Week Association.*—The Association helped 148 centres during the year under report. Out of these 113 centres took advantage of the Association's cinema unit and arranged a series of cinema demonstrations. Full set of models, cinema and magic lantern units and health literature were sent to 35 Health Exhibitions including the Food and Vitamins Exhibition held in Bombay city. At the request of the Director of Public Health for the Government of Bombay, a complete set of posters in English, which the Association generally uses at the Health and Child Welfare Exhibition, was sent for the Health Organization Conference in the Far East, Bandoeng (Java), through the All-India Institute of Hygiene and Public Health, Calcutta. 43 magic lantern lectures were arranged by the Association in the rural areas of Poona and Satara districts. Abstracts of reports received by the Honorary Secretary of the Association from the centres showed that about 608,880 persons of all castes and creeds attended the functions and 1,561 reels of cinema films on public health and child welfare topics were projected. The Association is continuing the Nutrition Research work on cheap Balanced Diets.

125. *Health and Baby Week.*—The Health and Baby Week movement continues to function satisfactorily in the Province. The Broach Sanitary Association organised Baby and Health Week celebration at Anor, Anakhi, Thrasla, Pakhajan, Huldar and Umarwada. Babies of the age of 1 month to 6 months, 6 months to 1 year and 1 year to 2 years were medically examined. Out of a total of 281 babies examined 132 babies were given prizes. The Sub-Committee of the Baby and Health Week of the Broach Sanitary Association undertook the work of the Health Week celebration in the city of Broach. Nandurbar Municipality held a baby week from 19th to 21st March 1937.

Baby and Health Week shows were celebrated at Satara, Barsi and Karwar towns. In Malsiras a Baby Show was held along with the Agricultural Show from 29th to 31st March 1937. Health and cinema shows were arranged in the villages of Mallsamudra, Mulgund and Hacti villages of Gadag taluka in Dharwar district by the Baby and Health Week Association.

126. *Sanitary Associations.*—The work done by the different Sanitary Associations is as shown below.

The Broach Sanitary Association in co-operation with the Broach branch of the Red Cross Society arranged 74 magic lantern lectures on small-pox, cholera, malaria, consumption, village sanitation, plague and maternity and child welfare. 43 cinema shows were held on prevention of blindness, care of teeth, home nursing, drinking water, fruits and vegetables, food and growth, milk and water in the city. 3 health shows were held in the city at the annual fairs and 5 at Suklatirth, Anor, Ankhi, Thrasla and Pakhajan. It continued the child welfare work at the Municipal Aminabai Dispensary and at the Maternity Home near the Post Office where 265 ante-natal and 210 infant cases were examined and given instructions on health. The village medical aid work was continued in 124 centres including 14 newly opened during the year and 76,807 patients took advantage of the scheme.

The Ahmedabad Sanitary Association.—The Association organised 57 magic lantern shows in different localities of Ahmedabad city and arranged Health Sections in the (*i*) Village Uplift Exhibition at Bardoli, (*ii*) Jalal-pur, (*iii*) Prantij, (*iv*) Health Exhibition by the Ahmedabad and Kankaria Railway Institute and health exhibitions in several mills of Ahmedabad. It arranged according to the instructions and guidance of the Assistant Director of Public Health, Northern Registration District, a health section at the Sanand Agricultural Exhibition and arranged to show cinema films during the celebration period. First-aid classes for the benefit of the students of the P. R. Training College for Men and at the Mahalaxmi Training College for Women were conducted by the Association. The Health Visitor of the Association carried on inspection in the city and sent complaints in writing to the Municipality.

The Arogya Mandal at Dhulia started two child welfare centres, one in old Dhulia and the other in New Pratap Mill. 190 and 138 children respectively took advantage of the centre. The Mandal also arranged city inspection round. An ante-natal clinic was opened and four lectures were organised by the Mandal.

The Bombay Sanitary Association arranged lectures in hygiene to the occupants of the insanitary chawls in the city with the aid of magic lantern slides. The Health Visitor of the Association was deputed to do health propaganda in public institutions, high schools and chawls in the city.

127. *Red Cross Society branches.*—The District Branches of the Red Cross Society at Broach and Ahmedabad worked in full co-operation with

the Sanitary Associations at Broach and Ahmedabad respectively. The District Branch at Broach gave medical relief such as free supply of eye-drop bottles and distribution of stock mixtures and quinine tablets. The Health Visitor of the Ahmedabad Branch attended to 759 ante-natal and 906 post-natal cases, 3,409 infants and 2,300 toddlers.

The 2 Travelling Dispensaries for Belgaum and Kanara districts under the Belgaum Branch of the Red Cross Society continued their work during the year. The respective medical officers in charge visited 66 and 54 centres and treated 4,350 and 2,101 patients in Belgaum and Kanara districts respectively. They visited 24 villages in Belgaum and 134 in Kanara district and 36 and 11 propaganda lectures were given by them in these districts. The Medical Officer in charge of Travelling Dispensary in Bijapur district visited 92 villages, gave 166 lectures and magic lantern demonstrations and treated 949 patients, examined 109 school children in 4 different schools and gave 48 lectures with the aid of magic lantern at the Bijapur District Prison.

CHAPTER XII.

Public Health Administration.

128. The Public Health Department consists of the Director of Public Health as the Head of the Department and of five Assistant Directors of Public Health, three being in charge of Registration Districts and one each in charge of the Vaccine Institute, Belgaum, and the Public Health Laboratory, Poona. The Assistant Directors of Public Health in charge Registration Districts in addition to public health duties are in charge of vaccination in British territory, excluding the Bombay Municipality and the Cantonments. There are 25 Inspectors of Sanitation and Vaccination and 341 Vaccinators, who constitute the subordinate staff.

129. *Selected districts.*—The system introduced in the year 1910 by which the control of vaccination in four districts of the Province is exercised by the Local Boards of those districts was continued throughout the year. Control of vaccination in the Dharwar District Local Board area was transferred to that Board with effect from 1st April 1937 as per Government Resolution, General Department, No. 1349/33, dated 28th January 1937.

130. *Changes in the strength of the establishment.*—In accordance with Government Resolution, General Department, No. 1493/33, dated 7th November 1936, ten Epidemic Medical Officers were appointed during the year.

The Municipalities employed 15 Medical Officers of Health and 93 Sanitary Inspectors. So far only two District Local Boards have appointed District Medical Officers of Health. These officers are subsidised by Government.

CHART VIII

INSERTION SUCCESS RATES OF PRIMARY VACCINATIONS WITH GLYCERINATED LYMPH IN THE SEVERAL REGISTRATION DISTRICTS OF THE PROVINCE & BOMBAY CITY FOR THE YEARS 1935-36, 36-37, & 37-38.



G.P.Z.O. POONA, 1939.

Appendices II-A and II-B of this Report show particulars of the Health Services in rural and urban areas, and particulars of maternity and child welfare centres, health visitors and trained midwives in urban and rural areas respectively.

Appendix II-C will show the annual income and expenditure of Institutions under the Public Health Department in the Province during the year 1937–38.

131. *Training of Sanitary Officers.*—There were 68 students on the class roll in Bombay of whom 59 together with 50 ex-students, making a total of 109, appeared for the examination. Out of this number, 43 passed and obtained certificates from the Royal Sanitary Institute, London. No prize was awarded as the candidate who topped the list of successful candidates drew pay while under training.

CHAPTER XIII.

Vaccination.

(This Chapter and all statistical tables connected therewith refer to the period from 1st April 1937 to 31st March 1938.)

The changes in the strength of the Vaccination establishment have been enumerated in the preceding Chapter, Public Health Administration.

132. *Primary vaccination* (*Appendix IV, Statement I*).—During the year 1937–38, 641,456 persons were primarily vaccinated against 605,243 in the previous year. There is an increase of 36,213 which is shared by all Registration Districts including Bombay city.

Results.—Out of 641,456 primary vaccinations performed 601,964 or 93·84 per cent. were successful and 1,252 or ·19 per cent. unsuccessful. In the remaining 5·97 per cent. of cases the result could not be ascertained. The percentage of success excluding unknown was 99·71.

Twenty-three infants were vaccinated a second time owing to failure of the first operation.

Age and sex.—Of the primary vaccinations, 327,965 were males and 313,491, females equal to the proportion of 104·62 to 100. 421,451 or 65·70 per cent. were infants under one year and 141,006 or 21·98 per cent. children between the ages of one and six years.

133. *Re-vaccination* (*Appendix IV, Statement I*).—547,126 persons were re-vaccinated against 222,555 persons in the previous year, the percentage of successful cases in which results were known was 44·28. The result could not be ascertained in 55·71 per cent. of cases.

Vaccination in Police Lines and out-posts is being carried out regularly.

The vaccinators in charge of important fair centres were directed to push on primary and re-vaccinations well in advance of the fairs.

134. *Cost of Vaccination.*—The cost of vaccination came to Rs. 4,16,019-14-11 as against Rs. 4,56,040-5-7 in the previous year. The average cost of each successful case of vaccination was Re. 0-11-2 as against Re. 0-11-10 in the previous year and average cost of each vaccination was Re. 0-6-2.

135. *Vaccine Institute, Belgaum.*—During the year 1,937,215 doses of lymph were manufactured. Compared with 1,447,310 during the previous year 1,810,980 doses of lymph were issued during the year. Besides the Vaccinators of the Province including Indian States and the Province of Sind, lymph was supplied to Baroda, Kathiawar, Portuguese India, and Civil and Military Medical Officers. Lymph was also sent to Somaliland.

Results of primary vaccinations were scrutinised by the Assistant Director of Public Health in charge of the Institute. The chart showing the results of monthly primary vaccinations for three years in the three Registration Districts and Bombay city is attached.

As mentioned in the last year's Annual Report, the work of change over of the Electric Installation to the Belgaum Electricity Mains was completed during the year under report and the supply of electric current began to be received from 17th July 1937.

A series of vaccine lymph manufactured last year were used during the year to know whether the quantity gained by vaccinating larger area of calf's skin is affected in quality of " TAKE " on children. It was found that there is no appreciable difference on children as seen on the eighth day after vaccination.

Administrative approval has been accorded by Government for a store house for hay in the premises of the Belgaum Vaccine Institute at an estimated cost of Rs. 8,592.

During the year, the purity and potency of all lymphs were tested as usual. The cold room has continued giving satisfactory service.

Calves.—On 1st April 1937, there were 32 calves in stock. Nine hundred and seventeen calves were hired during the year against 1,034 during the last year. No buffalo calves were hired. At the end of the year 42 calves, all unvaccinated, remained in balance. The rate of hire was Rs. 5-12-0 per calf during the year.

Expenditure.—The expenditure for the year amounted to Rs. 99,687-10-0 including the amount spent for current repairs to buildings, interest on capital outlay and pension contribution as against Rs. 98,667-6-7 in the previous year. The cost of lymph per dose despatched came to 10·6 pies.

136. *Compulsory Vaccination.*—Excluding Bombay and the six Cantonments of Ahmedabad, Ahmednagar, Poona, Kirkee, Belgaum and

Deolali, the Vaccination Act has been applied to 53 towns and 10 villages of the Province. During the year 43 prosecutions were instituted namely, 20 in Barsi town circle, 11 in Bijapur, 7 in Jalgaon and 5 in Bhusawal out of which 8 ended in conviction. Twenty-three cases were withdrawn the defaulters having complied with the provisions of the Act.

The bye-laws regarding registration of births and deaths are not properly enforced in some Municipalities with the result that many births escape registration and the number of children vaccinated is in consequence smaller than it should be. Such unvaccinated children provide a potential source of danger to the community and it is for local bodies to realise this and to see that all births which occur in the areas are registered and children vaccinated.

137. *General remarks.*—A training class for Vaccinators was held as usual at the Vaccine Institute, Belgaum. There were in all 18 candidates all of whom passed the final examination.

One Inspector of Sanitation and Vaccination, one Chief Sanitary Inspector, one Sanitary Inspector and one candidate deputed by Hyderabad (Sind) Municipality were given special training in the preparation and preservation of lymph and in the theory and practice of vaccination.

His Excellency Sir Lawrence Roger Lumley, G.C.I.E., D.L., the Governor of Bombay and Lady Lumley paid a visit to the Vaccine Institute accompanied by the Revenue Commissioner and the Collector of Belgaum.

The Institute was visited by Drs. Sawyer, Strong and Jacocks of the Rockefeller Foundation, the Surgeon General with the Government of Bombay, and Mrs. How Martyn.

The Vaccine Institute arranged a stall at the Agricultural exhibition held at Belgaum in January 1938.

CHAPTER XIV.

Other Public Health Services.

Public Health Laboratories.

138. The Public Health Laboratory at Poona worked throughout the year. The Municipal Laboratory, Ahmedabad, also worked during the year.

Poona Laboratory.—Mr. F. Barretto, D.P.H., was in charge of the Laboratory throughout the year except from 23rd April to 22nd May 1937 during which period he was on leave and

Lt.- Col. A. M. V. Hesterlow, I.M.S., officiated for him. The following table shows the number of different samples examined bacteriologically for the Water Works at Poona :—

Name.	Number of samples.					
	Raw water.	Filtered water.	Settled water.	Alumed water.	Chlorinated water.	Tap water.
Cantonment Water Works	271	279	166	113	336	1,044
Poona City Municipality Water Works ..	12	..	..	105	340	285
Holkar's Bridge Water Works	162	279	..	73	539	284
Lloyd Swimming Bath, Poona	..	..	..	..	257	..

Various Municipalities and other bodies sent 886 samples and 189 were examined in the course of experiments. The total for the year was 5,620 samples examined bacteriologically and 8,412 chemically. Chemical work for Poona Cantonment Water Works included examination of 268 samples of raw water, 261 filtered water and 278 chlorinated water ; for Kirkee Water Works, 161 raw water and 279 chlorinated water. Two hundred and eighty-seven samples of water from different places were also examined. Besides these 3,105 water samples were examined for free chlorine. The Laboratory examined 285 samples of sewage effluent from Bahiroba Pumping Station, 15 from Ammunition Factory, Kirkee, 2 from Belgaum, 8 from Ahmedabad, 2 form Sholapur, 5 from private septic tanks in Poona and 8 from other sources. The dose for chlorination was determined for 257 samples from Lloyd Swimming Bath sent to the Laboratory. One thousand, eight hundred and sixteen tintometer tests were conducted for water works in the whole of Poona. Four hundred and eighty-one samples of food, drugs, chemicals, etc., were examined during the year the bulk of work being for Surat and Broach towns under the Bombay Prevention of Adulteration Act, 1925.

Chlorination of Poona Water Supplies.—The Poona Cantonment Water Works continued to function efficiently as in previous years. The average number of total colonies grown on Nutrient Agar and Bile salt Agar for the chlorinated water was 4·46 and 0·03 against 1218·41 and 203·88 on the raw canal water the percentage reduction being 99·63 and 99·99 respectively during the year. The chlorinated water samples tested for Lactose Fermenters showed their absence in an average of 71·15 per cent. of samples in 500 c.c. and 95·42 per cent. in 100 c.c. Chloramine treatment was continued throughout the whole year. The Holkar Bridge Water Works, Kirkee, which consist of Paterson's Rapid Filters continued to be the source of supply to Kirkee and Ganeshkhind the daily average consumption being 560,000 gallons. Chloramine treatment is also being followed here. The bacteriological examination

of the chlorinated water yielded on an average 3·24 colonies on Nutrient Agar and 0·04 on Bile Salt Agar, the percentage reduction being 99·61 and 99·99. As regards Poona City water supply, the bacteriological results of chlorinated tap water from the Water Works compound and from various taps in the city showed an average of 37·82 and 43·59 total colonies on Nutrient Agar and 1·19 and 3·23 colonies on Bile Salt Agar respectively. The percentage reduction against canal water was 96·89 and 96·42 on Nutrient Agar and 99·58 and 98·87 on Bile Salt Agar respectively. Katraj tank water only was used during the period of canal closure; but ordinarily a small quantity of Katraj percolation is mixed with the main source of supply, i.e., canal water.

Water supplies at Alandi (Indrayani river) and Ambernath (Ulhas river) were chlorinated and samples were received for examination once a week. 23 samples were received for bacteriological examination from the Matheran water works, Mallet spring and Charlotte Lake being the sources of supply.

Experiments.—Experiments were carried out to ascertain the cause of the presence of green colour in the permanganated water in the settling tank at the Poona Cantonment water works. As a result it was found that the green colour was due to the action of Potassium Permanganate and not to the Algal growth.

A sample of raw water was received from Matheran water works for floc formation test as it was reported that no proper floc could be obtained by the addition of alum. Experiments were carried out with (1) alum alone, (2) alum and Soda Ph, (3) alum and permanganate and (4) alum and mud. In each case floc could be obtained within 30 minutes and settlement took place in three hours excepting the last (4) which did not settle even after 4 hours.

Experiments were carried out with float chamber samples (sewage) of Bahiroba Pumping Station, Poona, for the purpose of ascertaining the presence of Albuminoid Ammonia in solution or in the suspended matter. The samples were filtered through filter paper; free and Albuminoid Ammonia were determined both in the filtered and unfiltered samples. It was observed that there was a slight reduction of Free and Saline Ammonia, but there was a great reduction of Albuminoid Ammonia in the filtered samples. This showed that a major portion of the Albuminoid Ammonia came from suspended matter in the sewage. Five samples were examined in all.

The Assistant Director of Public Health in charge Public Health Laboratory, Poona, paid special visits to Mahableshwar, Bombay Suburban District, Alandi and Yeravda Central Prison and Mental Diseases Hospital in connection with water supplies there. He delivered a course of lectures in hygiene to the students of the Local Self-Government Institute, Poona. Instructions were given to 10 S.M.S. Officers on probation in water analysis, hygiene and public health and to a batch of 9 medical officers on epidemic duty in laboratory work pertaining to the analysis (both chemical and bacteriological) of water samples, estimation of dose of chlorine, alum, potassium permanganate and water supplies

of villages. He also gave demonstrations to the students from nine different institutions in Poona.

139. *The Municipal Laboratory at Ahmedabad.*—Mr M. V. Sane, Officer in charge of the Laboratory, examined in all 929 samples out of which 201 were chemical, 378 bacteriological and 350 pathological. He also examined 1,129 samples of food-stuffs.

140. *Public Analyst* (*Food Adulteration*).—The Bombay Prevention of Adulteration Act is in force in the following towns and the number of samples of food-stuffs examined by the Public Analysts concerned during the year are as shown against them :—

Ahmedabad.—991 samples of milk, 99 of ghee and 8 of butter were examined, the percentage of adulterated samples being 51.

Surat.—96 samples of ghee and 179 of milk were examined, the percentage of adulterated samples being 60 and 79 respectively. 13 samples of tea and 2 of butter were also examined and they were found to be pure.

Broach.—29 samples of ghee and 54 of milk were examined the percentage of adulterated samples being 41 and 87 respectively. Three samples of tea were also examined and they were found to be genuine.

Adulteration of food-stuffs is on the increase and now spreading to the rural areasas well. The Act, however, has so far been applied by the above three Municipalities and Bombay city ; three other Municipalities desire to apply the Act.

Total number of samples examined was 1,474 as against 987 in the previous year ; the percentage of adulterated samples of ghee was 54 per cent. as against 66 per cent. in 1936 and of milk was 57 and 65 per cent. respectively in the year under review and in 1936.

141. *Sanitary Works* (*Civil*).—New works and improvements to existing sanitary works are fully described in the Annual Report of the Board of Public Health Works, Bombay Province.

142. *Industrial Hygiene including Hygiene of Mines.*—The Assistant Directors of Public Health in charge Registration Districts continued their inspection of Factories (under the Factories Act of 1934) in the course of their tours submitting copies of their reports to the Managers and the Chief Inspector of Factories. The Assistant Director of Public Health, Northern Registration District, inspected 5 factories including gins and presses. The Assistant Director of Public Health, Southern Registration District inspected four factories and two mills. In connection with a mill, he found that there were blocks with back to back rooms for the mill, hands and the rooms were dark with no outlets for smoke. He therefore suggested that skylights and outlets should be provided. The Assistant Director of Public Health, Central Registration District, did not inspect any factories. The Assistant Director of Public Health, Northern Registration District, inspected 13 weaving sheds of the Mills in Ahmedabad where air conditioning was reported to be wanting and found that 8 mills

had installed it in full or in part but 5 had not made any attempt in this direction. The conditions in most of the mills in Ahmedabad are satisfactory but there are no adequate arrangements for the disposal of trade waste, and 25 mills were prosecuted for discharging it into public roads. The Textile industry in Ahmedabad has outgrown the facilities provided by the Municipality and when the Suburban Drainage which is undertaken by the Municipality is completed, the nuisance arising from the trade waste will disappear.

The Assistant Director of Public Health, Northern Registration District, inspected the Manganese Mines at Shivrajpur and a report was forwarded to the Chief Inspector of Mines in India, Dhanbad.

143. *Housing of Industrial population, Bombay city.*—During the year the following slum improvement and housing schemes were carried out by the Municipality of Bombay :—

		Approximate cost.
		Rs.
(*a*)	38 semi-permanent rooms at Parel Village Road	24,220
(*b*)	96 and 82 semi-permanent rooms at Suparibag and Dadar ..	1,00,085
(*c*)	150 semi-permanent rooms at Dharavi near Andhra Valley Sub-Station	92,047
(*d*)	150 semi-permanent rooms at Dharavi village	72,713

With the growing consciousness of the advantages of healthy and decent living for the working classes the model chawls constructed by the Trust about 20 years ago fail to satisfy their requirements. The Corporation have therefore started providing ground floor structures with proper plinths, nahanies, etc., for housing the labour class in the northern part of Bombay. The open spaces in front of these tenements can be used by the tenants for sleeping at night especially during hot weather when the climate of Bombay is rather trying but people are forced to huddle in the small rooms of the old type of chawls. The Corporation will be restricting these housing schemes to the outlying parts of Bombay where land is cheap. It is difficult to improve a slum area by partial demolition unless the Corporation have special powers for acquiring obstructive buildings or parts of buildings. Moreover this method can be adopted only if the buildings are strong enough to withstand remodelling. The Corporation have approved of a proposal to approach Government for giving them power to acquire any obstructive buildings or parts of buildings and a draft bill in this behalf is under consideration of a Committee of the Corporation. Some of the slums can be dealt with by this method whereas others which are so congested and without any suitable means of access can be improved only by the method of wholesale acquisition and demolition of buildings and laying out the area in plots. Wherever possible the method of acquisition of obstructive buildings and their demolition is preferable because it is quicker, cheaper and involves less disturbance of the population.

The Government Industrial Housing scheme in Bombay city consists of 207 chawls of reinforced cement concrete construction each containing 80 rooms. These chawls were constructed in the twenties of this century to remedy the shortage of accommodation for industrial labour, and are situated at four different centres of the city as follows :—

Name of centre.	Number of chawls.
DeLisle Road	32
Naigaum	42
Worli	121
Sewri	12
Total ..	207

Shops have been provided at all the four centres, and in addition 35 market stalls equivalent in space to 10 rooms have been provided at Worli. For the convenience of better class tenants three chawls at Naigaum have been converted into two-roomed tenements and three-roomed tenements. The sanitation of the chawls is well looked after, and the specific death rate per 1,000 tenants during the year 1936–37 was 20 only. With a view to popularising the chawls and making them more attractive it is proposed to carry out certain improvements to the chawls such as provision of electric lights in the rooms and corridors, provision of additional storage tanks for improving the water supply, etc. It is also proposed to provide play grounds at each centre and also facilities for school going children. Three rooms in each chawl are also proposed to be reserved for reading rooms and other recreations and a radio set in each centre is to be provided.

Ahmedabad.—The Ahmedabad Mills Housing Society, a Limited Liability Company launched by the Ahmedabad Millowners' Association, has built 435 tenements. In addition about 3,000 tenements have been built by outside agencies in mill localities since 1933. The Ahmedabad Municipality has put up since the last year 100 tenements at a cost of Rs. 50,000. The Majur Mahajan Sangh have spent Rs. 75,000 on 125 two-room tenements. 350 tenements have been built on the hire purchase system by the Pritampur and Gajanand Housing Societies in Ahmedabad. Good accommodation for industrial workers at Ahmedabad has been provided by the Ahmedabad Electricity Supply Company at Sabarmati Power Station.

The Report on an enquiry into working class Family budgets in Ahmedabad, 1937 shows—Although the population of Ahmedabad increased by 111,982 persons or 41·4 per cent. during the intercensal period 1921–1932, the number of residential buildings increased from 40,519 in 1921 to 43,822 in 1932, i.e., by 8 per cent. only and the number of occupied tenements from 70,876 to 97,297, i.e., by 37 per cent. The total number of tenements increased by 26,421 and out of these no fewer than 19,029 or 72 per cent. were single-room tenements. The wards which recorded a comparatively large increase in tenements were Dariapur No. 1,

Shahpur No. 2, Jamalpur No. 1 and Raikhad within the city proper and Pura 1, Shahar Kotda, Gomatipur and Asarwa outside the city walls. The following table shows the class of accommodation available in Ahmedabad :—

Tenements having	City proper.		Puras.	
	1921.	1932.	1921.	1932.
One room	20,805 (42)	28,330 (46)	18,381 (87)	29,876 (84)
Two rooms	13,854 (28)	16,952 (28)	1,981 (9)	4,010 (11)
Three rooms	5,542 (11)	6,381 (10)	462 (2)	850 (2)
Four rooms and over ..	9,375 (19)	9,959 (16)	476 (2)	939 (3)
Total ..	49,576 (100)	61,622 (100)	21,300 (100)	35,675 (100)

Note.—The figures in bracket denote percentages.

In 1932, nearly 46 per cent. of the tenements in the city proper were single-roomed, 28 per cent. were two-roomed, while the remaining 26 per cent. had three or more rooms each. The Puras are mostly populated by the working classes and it is not surprising that an over-whelming majority (84 per cent.) of the tenements in the Puras are single-roomed tenements.

Out of the 97,297 tenements in Ahmedabad in 1932, 58,206 were single-room tenements. The percentage of one-roomed tenements increased from 55 in 1921 to 60 in 1932 and that of the population living in them from 52 to 55. The average number of persons per single-room tenement was 3·39 in 1921 and 3·61 in 1932. This means that a larger proportion of the population is living in one-room tenements and that single-room tenements are becoming more and more crowded. The conditions in tenements having two or more rooms have also definitely worsened, thus showing that even the middle classes in Ahmedabad are worse off in the matter of housing than in 1921 although it must be stated that the new buildings recently constructed by several middle class Co-operative Housing Societies amidst congenial surroundings, such as on the Ellis Bridge side, provide decent accommodation for families who can afford to pay comparatively high house-rents.

It is apparent that the percentage of working class families living in single rooms in Ahmedabad increased from 72·93 per cent. (and 74·77 per cent. if huts are included) in 1926 to 76·26 per cent. in 1933–35 and that 22 or 2·2 per cent. of the families occupying single rooms were

sharing a room with other families or single men. It is also seen that while the percentage of total two-roomed tenements in the city remained stationary at 22 both in 1921 and 1932, the percentage of working class families living in them has increased from 18 in 1926 to 20 in 1933–35. The percentage of three and more-roomed tenements occupied by the working classes has, however, gone down from 7 to 3·71.

Analysis of Tenements by Number of Occupants (1933–35).

Number of rooms per tenement.	Number of tenements of each class containing the following number of persons.					
1	2	3	4	5	6	7
One room	200	253	210	149	73	47
Two rooms	36	56	60	50	18	18
Three rooms	2	9	5	6	5	1
Four rooms	1	1	1	2	..	1
Six rooms	1	..	..	..	..	..
Total ..	240	319	276	207	96	67
Percentage to total ..	18·91	25·14	21·75	16·31	7·57	5·28

Number of rooms per tenement.	Number of tenements of each class containing the following number of persons—*contd.*			Total.	Percentage to total.
1	8	9	10 and over.		
One room	21	5	6	964	75·96
Two rooms	10	6	4	258	20·33
Three rooms	6	1	1	36	2·84
Four rooms	2	..	1	9	0·71
Six rooms	..	..	1	2	0·16
Total ..	39	12	13	1,269 *	100·00
Percentage to total ..	3·07	0·95	1·02	100·00	..

* Excludes 22 one-roomed tenements and one three-roomed tenement shared by more than one family and one tenement for which complete information was not available.

144. *Urban Housing.*—In Nasik City the application of a town planning scheme to a portion of the town is under the consideration of the Municipality. Karwar Municipality is considering the town planning scheme for a congested area which has been the endemic focus of plague. In Thana, Igatpuri and Manmad towns, bye-laws as regards new buildings are being more strictly enforced. In Ahmednagar City waste land has been reclaimed and it is intended that the reclaimed area will be laid out on sanitary lines. The quarters for the town sweepers have been reconstructed or improved in Bassein, Vile Parle, Andheri and Bandra. In Kurla town the administration has improved conditions to some extent by the strict enforcement of the sanitary bye-laws and the bye-laws as regards new buildings and stables. The application of the Town Planning Act to the town is under consideration. In Ghatkopar town special regulations are in force in areas where the town planning scheme is applied. The concentration of huts near the Railway station is intended to be shifted to another locality. In Poona City, the widening of roads in the congested areas has helped in removing slum conditions to a certain extent in these areas. A town planning scheme in certain portions of Somwar and Mangalwar Peths is being carried out. In Hubli and Bagalkot towns houses were acquired for the removal of congestion or widening of roads. As regards Housing Societies, there is little or nothing to add to what has been mentioned in the Annual Report for 1936, except that the Societies in Bombay are finding it increasingly difficult to balance their budget owing to continued economic depression which has diminished the demand for tenements and consequently curtailed their income by way of rents. The large area of land acquired by the societies during the boom period has also considerably embarrassed their position, as the societies are experiencing great difficulties in disposing of the plots. The majority of housing societies in Bombay which have taken a loan from Government, find their rent recoveries gradually decreasing and clamour for reduction in the rate of interest. At Ahmedabad, except for internal dissensions, which have thwarted the working of one or two societies, the societies on the whole are progressing satisfactorily. The Pritampur colony comprising of the Venkar and new Venkar Co-operative Housing Societies catering to the Scheduled classes mostly working in the mills at Ahmedabad, deserves special mention.

145. *Rural Housing.*—There is very slow progress in this direction. The House Reconstruction Societies number in all 25 and are all concentrated in Ahmedabad District. These societies continue to work under difficulties, and during the year under report, the societies could manage to pay Rs. 9,217 (including interest) of Government loan reducing the balance outstanding to Rs. 39,597.

Port Health

146. *Port of Bombay.*—During the year 1937, eight hundred and eighty-two vessels of all classes with 168,174 crew and passengers were examined. The bedding and baggage of 43,976 crew and passengers were examined ; of these 43,863 were Asiatic and African crews, third class

or deck European and Indian passengers and 113 were members of crews and passengers in vessels in which infectious diseases had occurred during the voyage or in port. In addition, 32,146 coolies and stevedores were inspected to enable certain vessels to work cargo for a few hours after medical inspection and disinfection of crews and passengers.

Outgoing vessels.—In accordance with Government Notification, General Department, No. 1713, dated the 15th March 1917, the medical examination of all vessels, crews and passengers proceeding to ports beyond India, and disinfection of the clothing, etc., was carried out prior to departure as shown below :—

(*a*) of 27,523 Asiatic and African crews, i.e., a decrease of 131 on last year ;

(*b*) of 16,340 deck class passengers without cabin, i.e., an increase of 2,450 on last year.

Seven hundred and sixty-one outward bound vessels with 58,033 crew and 57,006 passengers or a total of 115,039 persons (exclusive of troops who were examined by the Military Embarkation staff) were inspected as against 777 vessels with 58,970 crew and 50,292 passengers or a total of 109,262 persons during 1936.

Ten vessels having cases of chicken-pox and measles on board among their crews or passengers arrived in this port and departed again within 12 days of their arrival. The bills of health granted to these vessels were endorsed to show the diseases which had occurred on board as well as the measures which had been taken before their departure for the prevention of the spread of infection on board or of its introduction into other ports.

International code wireless messages from arriving ships were received as usual which greatly facilitated Port Health Administration though certain vessels still neglect to make full use thereof.

The system of Advance Medical Inspection introduced in 1935 in the case of large passenger vessels, was continued during the year as it was found to have greatly facilitated the embarkation of passengers who desired to board the vessels earlier than the time scheduled for final inspection.

Infectious diseases in vessels arriving, departing or in the harbour or docks.—In accordance with the rules in Government Notification, General Department, No. 1713, dated 15th March 1917, medical inspection and disinfection of vessels actually infected or suspected were carried out. All pilgrim ships and African Mail ships were also inspected on arrival.

One hundred and nineteen incoming vessels with 19,365 crew and 33,742 passengers including pilgrims were inspected during the year. Of these 119 vessels, 24 (excluding intercoastal vessels but including Hired Transports and the 10 vessels with cases of infectious diseases mentioned above), were found to have or have had cases of infectious diseases on board at the time of arrival or during the voyage respectively. In these vessels on arrival there were 23 cases of Measles, 28 of chicken-pox, 11 of jigger and one of small-pox. The cases which occurred on Hired

Transports were dealt with by the Military Authorities on landing in Bombay and those among the crews of Transports or of other vessels of the Port Health Department. Such cases among troops were removed to the Military Hospital on shore for treatment and those among European crews and passengers to St. George's and Arthur Road Fever Hospitals and those among the Asiatic and African members of crews and passengers to the Jamsetji Jeejeebhoy, Gokuldas Tejpal, or Arthur Road Hospitals.

Fifty-one cases of infectious diseases such as small-pox, chicken-pox, measles, etc. were reported to have landed at overseas ports from ships which sailed from Bombay during the year 1937.

Disinfection and fumigation of ships.—During the year under report 26 vessels were disinfected on account of infectious diseases.

Under Article 28 of the International Sanitary Convention, 70 deratisation and deratisation exemption certificates were issued, the number of ships deratised by sulphur fumigation being 40, while the number of ships that qualified for exemption certificate was 30.

In all 3,755 baited traps were placed on board the ships deratised or exempted by the Port Health Department and 142 rats were caught, i.e. 3·78 rats per 100 traps. The type of the trap used was the wire "wonder" trap with counterbalanced drop.

Five thousand, five hundred and fifty-five bundles of clothing and bedding received from various hospitals were disinfected as against 9,763 during the year 1936.

No deaths due to mephitic gas poisoning as the result of cleansing bilges in ships occurred during the year, but there were 429 accidents on board vessels which were lying in the harbour or docks of which 5 proved fatal as against 376 and 4 respectively in 1936.

Red Sea Pilgrim Traffic.

The Outward Pilgrim Traffic.—Traffic began on 15th October 1936 and ended on 4th February 1937. Every pilgrim ship was thoroughly cleansed and freed from rats by the Clayton process prior to the commencement of her first voyage, and on consequent voyages such vessels were exempted from further deratisation if on inspection it was found that they were free from rats. All pilgrims were medically inspected and all bedding and clothing likely to have been exposed to infection were disinfected before embarkation. During the year 5,336 pilgrims left for Jeddah as against 4,037 in 1936, in 11 ships between the period from 15th October 1936 to 4th February 1937. Before embarkation all these pilgrims were vaccinated against small-pox and inoculated against cholera.

Inward Pilgrim Traffic.—During the year 5,134 pilgrims arrived from Jeddah in 11 vessels between the period from 14th March to 7th September 1937. Of these vessels 2 had on board cases of infectious diseases

on arrival. The number of deaths during the voyage on these vessels was 29.

Inspection of provisions of Laskar Crews.—As per Government of India, Department of Commerce, No. 5/M-11 (4), dated 26th September 1931, the Port Health Department continued the inspection of Laskars' provisions and 433 such inspections were carried out during the year as a result of which 14 samples of ghee, one of flour and 2 of corriander were condemned and replaced.

Cases of infectious diseases.—From amongst the crew and passengers of departing vessels, 4 and 52 cases respectively of various infectious diseases were picked out with 66 passenger contacts and they were not allowed to sail.

During the year the Port was declared to be infected with epidemic small-pox on 25th December and from that date all persons requiring to board ships working in quarantine were previously inspected and vaccinated and their clothing disinfected. All visitors were required to produce evidence of vaccination within the past 3 years before being allowed on board.

Vaccinal state of passengers.—Among 10,324 European crew of 401 cargo vessels 1,053 or a percentage of 10·19 were found to be either unprotected or insufficiently protected. In the cases of passenger ships and through passengers all were found to be protected. As regards local passengers the number of ships in which all were found to be protected was 36 while the number in which some were found to be unprotected was 161. In the former case 278 males and 377 women and children were protected against small-pox.

In the case of through passengers four males out of 278 and 8 women and children out of 377 were found to be unprotected. In 36 passenger ships all local passengers numbering 774 males and 777 females were found to be protected against small-pox and in 161 such ships out of 13,793 male and 12,053 female local passengers 1,010 or 7·3 and 451 or 3·7 per cent. respectively were found to be unprotected or insufficiently protected. Thus out of all local passengers viz., 14,567 males and 12,829 females in all ships the number of unprotected or insufficiently protected was 1,010 or 7·3 per cent. males and 451 or 3·7 per cent. females respectively.

All pilgrims and Africa bound passengers were fully protected against small-pox and thus have not been reckoned with the above statistics. Among 14,567 male passengers and 12,829 female passengers who embarked in Bombay during the year, 14·7 per cent. in the former and 4·02 per cent. in the latter failed to produce vaccination certificates. During the year under report a " Black List " was maintained recording statistics of ships wherein about 50 per cent. of the total British, American or other foreign crews were either unvaccinated or insufficiently protected against small-pox. A summary of 25 such ships showed that out of 812 crew, 39 were unvaccinated, 138 were vaccinated in childhood, 152 had been vaccinated more than 10 years ago and 225 had been vaccinated more than 3 years ago, but within 10 years.

Anti-mosquito measures on country craft lying in the harbour continued to be adopted by the Bombay Port Trust and this work has been greatly facilitated by promulgation of Government of Bombay, General Department, Notification No. 2458 of 26th October 1936. During the year under report, the Administrative Medical Officer, Bombay Port Trust examined 27,118 country crafts, 3,975 were found to be breeding mosquitoes thus giving a percentage of 14·65 which is a decided improvement on the figures of the previous year—19·77. Anti-mosquito work on larger vessels is not carried out as a matter of routine but Captains of vessels are required to send in a report as to whether they are troubled by mosquitoes on their vessels. Such reports were received from 530 vessels out of which 23 complained of mosquitoes thereon. On receipt of a complaint necessary steps were taken to minimise or eradicate the nuisance wherever possible.

Under Government Resolution No. 9018 of 1st May 1936, the Port Health Officer, Bombay, on receipt of a radio message from any vessel on the high seas asking for medical advice on account of illness on board is required immediately to transmit such advice by wireless to the ship. One ship wired for advice during the year.

The sanitary state of the harbour and of the various bunders and docks generally was good throughout the year. Anti-rat and anti-mosquito measures, etc. remained as hitherto in charge of the Administrative Medical Officer, Bombay Port Trust, the Port Health Department making recommendations when rat breeding, etc. was noted within Dock limits.

Major C. K. Lakshmanan, I.M.S., acted as Port Health Officer from 3rd of April to 16th October 1937 during the absence on leave of Lieut.-Colonel C. L. Bilderbeck, I.M.S., who was in charge of the Port Health Department for the remaining period of the year. The members of the Medical, Clerical and Sanitary Police staff performed their duties satisfactorily.

CHAPTER XV.

General Remarks.

147. *Scarcity—Panch Mahals District.*—Scarcity was declared in the eastern half of the Panch Mahals District viz., Dohad Taluka and Jhalod Mahal and parts of Godhra taluka with effect from 1st November 1936.

The following grants for relief measures were sanctioned :—

	Rs.
(*a*) Scarcity works	2,14,000
(*b*) Gratuitous relief and doles to inferior village servants and old and decrepit persons	43,500
(*c*) Medicines and Instruments ..	6,000
(*d*) Special vaccinator and peon ..	88
Total ..	2,63,588

Twelve Public Works Department works and ten local board works were started in the affected area.

Two medical officers were appointed for Dohad, two for Jhalod and one for Godhra area. Three of them continued up to 31st July 1937 and the other two up to 30th September 1937. First aid treatment was kept with the local Public Works Department officer with instructions and stock was replenished by the medical officers at the time of their visits. The Public Works Department officers were instructed in the method of permanganating water. The medical officers inspected water supply, cleanliness, permanganation and latrine arrangements.

There was no epidemic. Few cases of small-pox were noticed in villages from which the labourers were drawn ; a special vaccinator was appointed to carry on vaccination and revaccination, and the epidemic was checked. The general health of the labourers was very good in Godhra Taluka, good in Dohad Taluka and slightly lower in Jhalod Mahal.

The scarcity programme came to an end from 1st December 1937.

Ahmednagar District.—Scarcity was declared in all parts of the Ahmednagar District except the irrigated parts of Kopergaon and Rahuri Talukas and the Dangi portions of Akola Taluka with effect from 22nd September 1936.

The following grants for relief measures were sanctioned :—

	Rs.
(*a*) Scarcity works	266,000
(*b*) Drinking water supply	29,000
(*c*) Gratuitous relief and doles ..	126,750
(*d*) Establishment	18,169
(*e*) Tagai grant	100,000
(*f*) Medicines and instruments ..	470

Nine Public Works Department works were started in the affected area. Two scarcity medical officers were appointed. The Inspector of Sanitation and Vaccination, Ahmednagar District arranged to carry on revaccination of workers.

The scarcity programme came to an end from 1st January 1938.

Poona District.—Scarcity was declared in Sirur Petha and Indapur Taluka from 9th November 1936 and 1st March 1937 respectively.

The following grants were sanctioned for relief measures :—

	Rs.
(*a*) Scarcity works	19,427
(*b*) Drinking water supply	7,748
(*c*) Gratuitous relief and doles ..	61,333
(*d*) Establishment	3,888

Five Public Works Department works were started in the two talukas. The Medical Officers incharge Sirur Dispensary and Talegaon-Dhamdhere

Dispensary inspected the works in Sirur Petha and the Special Medical Officer on scarcity duty in Indapur Taluka was inspecting the works in the taluka. They treated water supplies, gave medicines and looked to the conservancy arrangements. There was no epidemic throughout the period and the labourers kept good health. A case of small-pox occurred in Ranjangaon village ; further spread was checked by vigorous revaccination carried on among the labourers.

The scarcity in Sirur Petha came to an end from 1st January 1938 and that in Indapur Taluka from 1st February 1938.

Sholapur District.—Scarcity was declared in Sholapur, Madha, Pandharpur, Karmala and Sangola Talukas of the District with effect from 23rd November 1936.

The following grants were sanctioned for relief measures :—

	Rs.
(*a*) Scarcity works	1,90,000
(*b*) Gratuitous relief and doles ..	1,05,850
(*c*) Fodder operations	20,000

Eight Public Works Department works were started in the affected area. No special medical officers were appointed. Medical Officers I/c Dispensaries visited the works and when required provided drugs and dressings from the dispensaries. There was an outbreak of cholera at Sangola and in the neighbouring villages ; necessary precautions were taken about water supply. The arrangements at the camps were satisfactory in Karmala Taluka.

The scarcity programme in Karmala and Sangola Talukas ended on 1st January 1938 and that in other talukas of the district on 1st October 1937.

Bijapur District.—Scarcity was declared in the Indi and Sindgi Talukas of the District from 30th November 1936 and in 41, 22 and 20 villages of the Bijapur, Bagewadi and Muddebihal Talukas respectively from 1st January 1937.

The following grants were sanctioned by Government for relief measures :—

	Rs.
(*a*) Tagai grant	75,000
(*b*) Scarcity works	1,78,350
(*c*) Gratuitous relief and doles ..	5,57,280
(*d*) Establishment	57,405
(*e*) Contingencies	1,000
(*f*) Medicines and instruments ..	3,430
(*g*) Fodder operations	10,000
(*h*) Advance to weavers	10,000

Nine Public Works Department works, nine village works, 12 District Local Board works and one Municipal work were started in the District.

Two medical officers were appointed to visit the works in turn and each centre was provided with a medicine chest with instructions in English and Kanarese and the medicines were replenished by the medical officers when they visited the centres. They treated the patients, looked to sanitation, water supply and arrangement of kitchens. The health of the people in all the affected villages was good. No cases of malnutrition or starvation were noticed. The District was free from epidemics.

In addition to the preliminary visits when the crops failed and scarcity was imminent, the Director of Public Health paid visits and inspected the health condition of the workers in scarcity affected parts as follows :—

	Month of visit.
Bijapur District	May 1937.
Ahmednagar District	April 1937.
Sholapur District	May 1937.
Panch Mahals District	April 1937.

The Inspector of Sanitation and Vaccination of the district and the Assistant Director of Public Health of the Registration District were in constant touch with scarcity works. They frequently visited the villages in the scarcity tracts and inspected the sites for the camps near the works, made arrangements for the sterilization of water and the sanitation of the Camps. The food was also inspected at intervals and deficiency of water was promptly brought to the notice of the authorities. A sharp look-out for early signs of malnutrition was kept throughout.

On the whole, the health of the people in the scarcity tracts was good ; the wages paid to the workers were sufficient for sustenance ; the water supply was adequate in spite of great difficulties in obtaining water in these tracts ; medical relief was provided everywhere. There was no epidemic among the persons on the works in any of the districts and the death rate was with the exception of the Panch Mahals lower than the death rate of the previous year as will be seen from the following table :—

Bijapur.		Panch Mahals.		Ahmednagar.		Poona.		Sholapur.	
1937.	1936.	1937.	1936.	1937.	1936.	1937.	1936.	1937.	1936.
21·29	27·81	27·32	23·61	27·15	30·21	27·73	29·81	30·83	32·96

148. *Public Health Act.*—The framing of the Public Health Act for the Province is still under the consideration of Government.

149. *Public Health Essays.*—Drs. Barber and Rice of the Rockefeller Foundation worked for five months in Poona and published a paper in the Journal of Malaria Institute of India in March 1938. A summary of this work is given under Malaria.

Dr. Shiveshwarkar read a paper on " The Public Health Programme of the Government of Bombay " at Bombay. This paper has been reviewed in the Journal of Hygiene.

150. *Personal Proceedings and Office.*—The activities of the Assistant Director of Public Health in charge Public Health Laboratory, Poona, are given in Chapter XIV.

Supervising staff.—The following table shows the various officers who held the appointments of Director and Assistant Directors of Public Health during the year under report :—

Appointment.	Name.	Period.
Director of Public Health ..	Lt.-Colonel A. Y. Dabholkar, M.C., I.M.S.	1st January to 31st December 1937.
Assistant Director of Public Health, Central Registration District, Poona.	F. Barretto, Esq., D.P.H. ..	1st to 20th January 1937.
	Lt.-Colonel A. M. V. Hesterlow, B.Sc. (P. L. Edin.), I.M.S.	21st January to 31st December 1937.
Assistant Director of Public Health, Northern Registration District, Ahmedabad.	N. T. Advani, Esq., D.P.H.	1st January to 26th February 1937.
	Lt.-Colonel A. H. Harty, I.M.S.	27th February to 12th April 1937.
	N. T. Advani, Esq., D.P.H.	13th April to 23rd December 1937.
	Lt.-Colonel A. H. Harty, I.M.S.	24th to 31st December 1937.
Assistant Director of Public Health, Southern Registration District, Belgaum.	R. V. Shiveshwarkar, Esq., D.P.H.	1st January to 30th November 1937.
	K. A. Gandhi, Esq., D.P.H.	1st to 22nd December 1937.
	R. V. Shiveshwarkar, Esq., D.P.H.	23rd to 31st December 1937.
Assistant Director of Public Health in charge Vaccine Institute, Belgaum.	K. A. Gandhi, Esq., D.P.H.	1st January to 4th February 1937.
	R. V. Shiveshwarkar, Esq., D.P.H.	*26th February to 26th April 1937.
	K. A. Gandhi, Esq., D.P.H.	27th April to 31st December 1937.

*The Superintendent of the Vaccine Institute was in charge of the office duties of the Assistant Director, from 5th to 25th February 1937.

The Assistant Director of Public Health, Northern Registration District, Ahmedabad, visited 76 towns and villages during the year. He made a complete survey of 7 towns and 9 villages having Village Panchayats or Sanitary Committees and 43 towns and villages for vaccination purposes. 41 towns and villages were visited for general advice and 19 for special inspection. He inspected 10 dispensaries, 10 rain gauges, 8 Police lines including lock-ups, 7 factories and gins and 3 schools at

Kaira. He visited areas affected with epidemics and advised local authorities regarding the measures taken and rat trapping operations in villages of Borsad Taluka.

He inspected Tokartalav at Nandurbar and the reservoir at Dhulia in connection with water works. He visited Borsad in connection with anti-plague measures and in connection with water supply scheme in Borsad town. He inspected 3 Relief works in Dohad taluka, 4 in Jhalod taluka and 5 in Godhra taluka. He visited Vansar village, Matar taluka, Kaira District and inspected a well, water of which was reported to have medicinal properties. The water was analysed and was found to have certain medicinal properties. He investigated the causes that were responsible for the outbreaks of cholera in Khandesh districts. He investigated the causes of Typhoid fever in Dhulia and discussed the situation with the local medical practitioners. He attended the meeting held in the office of the District Local Board, Ahmedabad, in connection with the flow of the sullage water of Ahmedabad into the river Sabarmati. The problem regarding incidence of malaria in Matar taluka as well as in Matar town was discussed with the Medical Officer-in-charge Dispensary, Matar, and necessary advice was given to him by the Assistant Director. He organised the Health Section of the Agricultural Show at Sanand with the co-operation of the Sanitary Association, Ahmedabad, and the Bombay Presidency Baby & Health Week Association. During the visit of His Excellency the Governor to this Show, His Excellency was pleased to give him an interview. The Inspectors of Sanitation and Vaccination conducted the classes for village officers and delivered lectures on vital statistics and Public Health.

The Assistant Director of Public Health, Central Registration District, Poona, visited 31 villages and towns to trace the source of cholera and to suggest measures for its prevention, 32 villages for vaccination and 11 villages and towns for making general sanitary inspection. He visited 7 villages for inspecting the scarcity camps. He visited Kondhanpur, Dehu and Alandi to supervise the sanitary arrangements of the Fair. He visited the maternity and child welfare centres. He attended 7 meetings of the Bombay Mofussil Maternity, Child Welfare and Health Council and 3 meetings of the Lady Wilson Village Maternity Association. He inspected the well in the compound of the Agricultural College and gave instructions regarding permanganation, with demonstration. He visited twice the Industrial School, Yeravda, to attend to the complaint of the Superintendent, in connection with the insanitary condition of the area near the school. He attended to public complaints regarding insanitary condition near their premises at Bandra and Jogeshwari. He delivered lectures on hygiene to the students of the Byramji Jeejibhoy Medical School, Poona. He visited 14 villages in Ahmednagar District for the purpose of inspecting the condition whether irrigation within $\frac{1}{4}$ mile limit could be allowed. Monsoon classes were held by the Inspectors of Sanitation and Vaccination at 46 villages and about 2,478 Police Patels and Talathis attended the same.

The Assistant Director of Public Health, Southern Registration District, visited 86 villages and towns for various purposes. He inspected 7 sites for burial grounds, 4 for school building, 5 for village extensions, 3 for markets, 1 for public latrines, 3 for wells, 1 for manure pit, 1 for slaughter house, 1 for dispensary, 1 for leper asylum, 2 for urinals, 1 for public latrines and 1 for septic tank. He inspected fair areas at Rattihalli, taluka Kod in Dharwar District and Mari fair at Sirsi. He supervised fair arrangements at Shingnapur. He attended Pandharpur Ashadhi and Kartiki fairs and inspected sanitary arrangements made by the Medical Officer of Health, Pandharpur Municipality. He visited 12 villages for inspection of water supplies, 16 for plague and 8 for cholera. He visited Hindalgi Jail in connection with septic tank. He disapproved the site proposed for night-soil depôt at Barsi from the sanitary point of view. He inspected the existing slaughter house at Sankeshwar and found that it was a menace to the public health. It was recommended that it should be condemned immediately and a slaughter house constructed on a new site. A suitable site was pointed out on the outskirts of the village. He approved of the site for tanneries at Barsi near the Hindu cremation ground. He inspected the site for a Leper Clinic and a Dharmashala at Kongoli, taluka Chikodi and approved of it from public health point of view. He visited Infant Welfare Centres at Saundatti and Satara. He inspected the proposed site for dispensary at Haveri. He visited the schools in 3 villages in Kanara district and 3 in Dharwar district. He attended the Conference held in March in Sardars' High School, Belgaum, regarding argicultural show. He attended the meeting in the Collector's office, Belgaum, and discussed with him and the Heads of other Departments regarding co-ordination of work towards the general good of the district. He attended the meeting of the Red Cross Committee in the Commissioner's office twice during the year. Lectures were delivered by the Inspectors of Sanitation and Vaccination on different health subjects.

The Director of Public Health for the Government of Bombay visited 91 towns and villages in connection with water supply, drainage, investigation into the causes of and preventive measures against epidemics, general sanitation, village improvement, scarcity relief, etc. He inspected water supply of Ahmednagar, Nasik, Ahmedabad, Surat, Sholapur, Borsad, Bijapur, Dharwar and Rattihalli. He attended the Ashadhi Fair at Pandharpur and inspected the arrangements made there for mass inoculation of pilgrims. He attended the meetings of the Infectious Diseases Hospital Committee, Poona. He also attended the meetings of the Bombay Mofussil Maternity Child Welfare & Health Council, the Bombay Presidency Baby and Health Week Association, the Bombay Presidency Branch of the British Empire Leprosy Relief Association, the Bombay Nurses, Midwives and Health Visitors' Council and the Bombay Social Hygiene Council. He visited Dharwar and Sankeshwar in connection with cyanogas operations. He attended the meeting of the Central Advisory Board of Health in Simla and the Medical Research Workers' Conference in New Delhi.

151. *The Board of Public Health Works.*—During the year 1937-38 two meetings of the Board were held. In addition, matters that came up before the Board were also dealt with by circularising the Members.

The Board accorded approval to the following projects for execution :—

Surat Drainage.—Outfall works.

Dhulia.—Street drains in Drainage Districts Nos. 10 to 13.

Sholapur.—Laying of further portion of the collecting and gravitation outfall sewer ; and Sadar Bazar Nala sewer.

Khed (*Ratnagiri*).—Water Supply.

A. Y. DABHOLKAR,
Lieut.-Colonel, I.M.S.,
Director of Public Health for the Government of Bombay.

Poona, 19th September 1938.

APPENDIX II.

The following table shows year of completion of drainage or water-works and a comparison of mean death-rate in the towns concerned for periods preceding and subsequent to installation.

In column 7 is given for comparison the death-rate of the adjoining rural circle for the year under report:—

District.	Towns.	Date of completion of work.		Mean death-rate. (*a*)		Death-rate in adjoining rural circle (*a*).	Mean death-rate from cholera *plus* dysentery and diarrhœa.		Remarks.
		Drainage.	Water Supply.	For years preceding the installation.	For the years (succeeding installation) ending 1937.		For years preceding works.	For the years (following the works) ending 1937.	
1	2	3	4	5	6	7	8	9	10
Sholapur ...	Sholapur ...	...	1917	61·01	35·09	31·67	14·05	3·53	
Do. ...	Pandharpur.	...	1911	49·98	51·02	28·45	19·60	7·19	
Nasik ...	Nasik ...	...	1913	52·73	34·60	29·33	11·33	2·87	
Bijapur ...	Bijapur ...	...	1913	30·08	21·44	19·85	1·77	1·99	
Poona ...	Lonavla ...	...	1915	30·68	23·51	30·80	2·49	1·29	
Do. ...	Poona City*.	1916	...	36·47	38·16	17·23	10·18	2·30	* Chlorination of water began in 1916.
Satara ...	Karad ...	...	1916	18·58	15·41	26·87	7·10	1·92	
Sholapur ...	Barsi ...	...	1917	44·41	37.82	34·20	5·83	2·07	
Nasik ...	Trimbak ...	...	1921	43·88	25.51	29·33	2·35	1·80	
Poona ...	Poona Cantonment.†	...	1916	23·49	14.53	17·23	2·07	·93	† Change in type of installation.

(*a*) Exclusive of Plague and Influenza.

APPENDIX

Table showing Health Services in Rural and Urban

Districts.	Rural areas.							
	Medical Officers of Health.				Epidemic staff.	Sanitary and Health Inspectors.	Vaccinators.	
	Holding D.P.H. or equivalent qualification.		Licentiates (L.P.H.S.)					
	Whole time.	Part time.	Whole time.	Part time.			Male.	Female.
1	2	3	4	5	6	7	8.	9
Bombay City ...	...	...	...	...	...	...	...	...
East Khandesh ...	...	...	...	...	8	1	19	...
West Khandesh ...	...	...	...	...	14	1	14	...
Surat ...	...	...	...	...	...	...	13	...
Broach ...	...	...	...	...	...	...	6	...
Panch Mahals ...	...	...	...	...	...	...	8	...
Kaira ...	...	...	...	...	1	1	11	...
Ahmedabad ...	...	...	...	...	...	...	13	...
Ahmednagar ...	...	...	...	...	6	...	18	...
Poona ...	...	...	...	...	1	...	16	...
Nasik ...	...	...	...	...	5	...	19	...
Thana ...	...	...	...	...	1	...	19	...
Bombay Suburban ...	...	...	...	...	...	...	2	...
Kolaba ...	...	...	...	...	...	...	15	...
Ratnagiri ...	...	...	...	...	...	...	22	...
Belgaum ...	...	...	...	...	15	...	19	...
Dharwar ...	1	...	...	...	...	3	21	...
Bijapur ...	...	...	...	...	...	...	18	...
Kanara ...	...	...	...	...	...	...	17	...
Sholapur ...	...	...	...	...	6	...	12	...
Satara ...	1	...	...	...	6	1	21	...
Total ...	2	...	...	...	63	7	303	...

II-A.

areas in the Bombay Province during 1937.

Urban areas.											
Medical School Officers.	Other Health staff.	Medical Officers of Health.				Sanitary Inspectors and Health Inspectors.	Vaccinators.		Inspectors of Vaccination.	Medical School Officers.	Other Health staff.
		Holding D.P.H. or equivalent qualification.		Licentiates (L.P.H.S.).							
		Whole time.	Part time.	Whole time.	Part time.		Male.	Female.			
10	11	12	13	14	15	16	17	18	19	20	21
...	...	19	...	44	...	16	12	...	1	4	180
...	1	...	...	1	...	5	5	...	...	...	...
...	2	...	...	1	...	3	3	...	...	...	...
...	1	1	...	...	...	8	3	...	...	...	1
...	1	...	...	1	...	2	1	...	...	...	...
...	1	...	...	...	...	2	...	...	...	...	...
...	...	...	...	1	...	2	1	...	...	...	...
...	1	2	...	...	...	17	5	...	...	4	3
...	2	1	...	...	...	1	...	...	...	...	...
...	3	1	...	...	...	10	...	...	...	...	...
...	5	1	...	...	...	6	...	...	...	...	...
...	3	...	...	...	...	2	...	...	...	...	...
...	...	...	...	2	...	3	...	...	...	...	...
...	2	...	...	...	...	...	...	...	...	...	...
...	2	...	...	...	...	...	...	...	...	...	...
...	...	...	...	...	...	3	1	...	...	...	...
...	1	1	...	...	...	7	3	...	...	...	...
...	2	...	...	1	...	4	2	...	...	...	1
...	...	...	...	...	...	...	...	...	...	...	...
...	23	2	...	...	...	12	4	...	...	...	32
...	...	...	...	...	...	3	1	...	...	...	...
...	50	28	...	51	...	106	41	...	1	8	217

APPENDIX

Table showing maternity and child welfare centres, health
Bombay Province

Maternity and
Centres main

Districts.	Government.		Local and Municipal bodies.	
	Rural.	Urban.	Rural.	Urban.
Bombay City	.....	.....	.....	5
East Khandesh	.....	.....	.....	.....
West Khandesh	.....	.....	.....	.....
Surat	.....	.....	.....	.....
Broach	.....	.....	.....	1
Panch Mahals	.....	.....	.....	.....
Kaira	.....	.....	.....	.....
Ahmedabad	.....	.....	.....	.....
Ahmednagar	.....	.....	.....	1
Poona	.....	.....	.....	.....
Nasik	.....	.....	.....	.....
Thana	.....	1	2	1
Bombay Suburban	.....	.....	.....	1
Kolaba	.....	.....	.....	.....
Ratnagiri	.....	.....	.....	2
Belgaum	.....	.....	.....	.....
Dharwar	.....	.....	.....	1
Bijapur	.....	.....	.....	1
Kanara	.....	.....	.....	.....
Sholapur	.....	.....	13	2
Satara	.....	.....	.....	.....
Total ...	.....	1	15	15

II-B.

visitors and trained midwives in rural and urban areas in the during 1937.

Child Welfare—tained by							
Other agencies.		Trained visitors.		Trained midwives.		Trained dais.	
Rural.	Urban.	Rural.	Urban.	Rural.	Urban.	Rural.	Urban.
.....	10	.....	8	.....	30	.....	.....
.....	.....	.....	.....	5	14	29	13
2	.....	.....	.....	.....	5	.....	.....
.....	1	.....	.....	1	2	.....	.....
.....	4	.....	.....	2	3	.....	.....
.....	.....	.....	.....	.....	3	.....	.....
.....	4	.....	5	7	6	.....	7
.....	.....	.....	.....	.....	26	.....	5
.....	1	.....	2	.....	.....	2	.....
1	1	1	.....	2	4	.....	1
.....	.....	.....	.....	1	2	.....	.....
2	.....	.....	.....	1	6	1	.....
.....	.....	.....	.....	1	5	.....	4
	1	.....	1	.....	2	.....	.....
.....	4	.....	.....	.....	4	.....	1
.....	1	.....	1	.....	5	6	5
.....	2	.....	.....	2	11	8	.....
.....	1	.....	.....	1	4	4	.....
.....	.....	.....	.....	2	3	5	2
.....	3	.....	1	11	25	.....	14
2	.....	1	.....	.....	4	.....	.....
9	33	2	18	36	164	55	52

APPENDIX

Statement showing the Annual Income and Expenditure of Province of Bombay

No.	Name of Institution.	Income.				
		Sale proceeds of sera vaccine, quinine, etc.	Contributions.	Miscellaneous.	Recoveries of over-payment.	Total.
		Rs.	Rs.	Rs.	Rs.	Rs.
1	Director and Assistant Directors.	40,488	.....	3,870	.....	44,358
2	Public Health Laboratory, Poona.	.....	17,057	375	.....	17,432
3	Belgaum Vaccine Institute ...	1,25,627	.....	3,255	.....	1,28,882
4	Local Vaccination Establishment.	.....	1,10,799	.....	.....	1,10,799
5	Infectious Diseases Hospital, Poona.	.....	28,766	.....	.....	28,766
	Total ...	1,66,115	1,56,622	7,500	.....	3,30,237

* Interest and pension charges which amount to Rs. 16,505

II-C.

Institutions under the Public Health Department in the during the year 1937-38.

Expenditure.							
Salaries.		Allowances.	Contingencies.	Grant-in-aid.	Other charges including expenditure on Medical Officers appointed on Malaria and inoculation duties and quinine etc.	Total.	
Pay of officers.	Pay of establishment including peons.						
Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	
48,739	.....	9,031	.....	.....	.....	57,770	Charged.
21,941	88,497	19,931	13,818	71,189	1,24,289	3,39,665	Voted.
117	.....	.....	.....	.....	.....	117	Charged.
12,815	14,694	681	7,864	.....	.....	36,054	Voted.
15,421	19,389	2,574	31,843	.....	.....	*69,227	,,
.....	1,09,862	34,014	71	24,073	.....	1,68,020	,,
10,800	13,826	135	8,243	.....	.....	33,004	,,
48,856	.....	9,031	.....	.....	.....	57,887	Charged.
60,977	2,46,268	57,335	61,839	95,262	1,24,289	6,45,970	Voted.

are not included in the total actual expenditure of the Institute.

ANNUAL FORM NO. I.—*Showing the* BIRTHS *registered in the*

1	2	3			4		
Number.	Districts.	POPULATION ACCORDING TO CENSUS OF 1931.			NUMBER OF BIRTHS REGISTERED.		
		Male.	Female.	Total.	Male.	Female.	Total.
1	Bombay City	747,381	414,002	1,161,383	18,220	16,954	35,174
	Northern Registration District.						
2	East Khandesh	612,693	593,342	1,206,035	29,229	27,500	56,729
3	West Khandesh	373,971	363,141	737,112	19,541	18,274	37,815
4	Surat	348,283	345,330	693,613	17,099	16,211	33,310
5	Broach	174,894	159,276	334,170	8,927	8,544	17,471
6	Kaira	395,104	343,546	741,650	17,814	16,057	33,871
7	Panch Mahals	236,622	217,904	454,526	9,265	8,743	18,008
8	Ahmedabad	527,102	471,369	998,471	25,218	23,580	48,798
	Central Registration District.						
9	Ahmednagar	497,796	485,912	983,708	20,058	18,842	38,900
10	Poona	590,756	565,166	1,155,922	21,169	19,216	40,385
11	Nasik	507,673	490,684	998,357	22,318	20,529	42,847
12	Thana	430,533	406,092	836,625	12,735	11,918	24,653
13	Bombay Suburban ...	102,847	76,246	179,093	2,396	2,237	4,633
14	Kolaba	315,017	313,704	628,721	12,548	11,549	24,007
15	Ratnagiri	609,309	693,218	1,302,527	23,048	21,729	44,777
	Southern Registration District.						
16	Belgaum	549,782	523,709	1,073,491	23,502	22,423	45,925
17	Dharwar	565,641	537,036	1,102,677	22,514	21,269	43,783
18	Bijapur	440,579	428,641	869,220	19,201	18,278	37,479
19	Kanara	214,085	203,750	417,835	7,360	6,825	14,185
20	Sholapur	453,509	424,011	877,520	19,252	18,582	37,834
21	Satara	592,303	587,409	1,179,712	25,102	23,790	48,892
	Total for the Province ...	9,285,880	8,646,468	17,932,368	376,426	353,050	729,476

III.

DISTRICTS *of the* BOMBAY PROVINCE *during the year 1937.*

5			6		
RATIO OF BIRTHS PER 1,000 OF POPULATION.			MEAN RATIO OF BIRTHS PER 1,000 DURING PREVIOUS FIVE YEARS.		
Male.	Female.	Total.	Male.	Female.	Total.
15·69	14·60	30·29	14·43	13·54	27·97
24·23	22·80	47·03	24·02	22·66	46·68
26·51	24·79	51·30	25·57	24·44	50·01
22·92	21·73	44·65	22·33	21·13	43·46
26·71	25·57	52·28	24·51	23·28	47·79
24·01	21·65	45·66	22·54	20·20	42·74
20·38	19·24	39·62	19·31	17·65	36·96
25·26	23·61	48·87	23·63	21·75	45·38
20·39	19·15	39·54	22·69	21·34	44·03
18·31	16·62	34·93	19·73	18·31	38·04
22·35	20·56	42·91	22·56	21·03	43·59
15·22	14·24	29·46	17·04	16·09	33·13
13·38	12·49	25·87	12·13	11·23	23·36
19·81	18·37	38·18	19·13	18·98	38·91
17·69	16·68	34·37	17·71	16·77	34·48
21·89	20·89	42·78	20·48	19·54	40·03
20·42	19·29	39·71	19·09	18·36	37·45
22·09	21·03	43·12	21·04	20·36	41·40
17·61	16·33	33·95	17·61	16·67	34·27
21·94	21·18	43·11	23·11	21·80	44·90
21·28	20·17	41·44	20·76	19·80	40·56
20·99	19·69	40·68	20·66	19·45	40·11

ANNUAL FORM No. I (*a*)—*Showing the* STILL-BIRTHS *registered*

BOMBAY PROVINCE

Serial Number.	Districts.	Still-					
		Muhammadans.		Hindus.		Jains.	
		Male.	Female.	Male.	Female.	Male.	Female.
1	Bombay City	242	182	934	729	25	17
	Northern Registration District.						
2	East Khandesh	30	15	305	192	1	3
3	West Khandesh	13	9	346	170	...	...
4	Surat	44	25	322	139	13	6
5	Broach	27	20	69	50	...	1
6	Kaira	15	22	79	53	1	...
7	Panch Mahals	2	...	35	22	...	...
8	Ahmedabad	55	46	207	184	20	19
	Central Registration District.						
9	Ahmednagar	11	13	115	77	...	...
10	Poona	17	10	387	260	...	...
11	Nasik	7	5	103	55	1	...
12	Thana	7	4	44	46	...	...
13	Bombay Suburban	2	...	16	11	1	...
14	Kolaba	12	5	128	115	1	...
15	Ratnagiri	4	7	53	49	...	...
	Southern Registration District.						
16	Belgaum	48	60	614	502	21	30
17	Dharwar	122	87	720	543	7	4
18	Bijapur	53	47	474	422	3	1
19	Kanara	32	12	328	329	1	...
20	Sholapur	34	23	337	250	4	...
21	Satara	8	7	181	152	3	3
	Total for the Province ...	785	599	5,697	4,450	102	84

according to Classes and Sex in the DISTRICTS *of the*
during the year 1937.

BIRTHS.

Christians.		Parsis.		Other Classes.		TOTAL.			Percentage ratio to live-births.
Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Total.	
66	57	33	22	20	13	1,320	1,020	2,340	6·65
1	...	...	...	...	2	337	212	549	·97
...	1	...	...	1	...	260	180	440	1·16
1	2	5	6	...	...	385	278	663	1·99
1	...	...	...	...	...	97	71	168	·96
1	1	...	1	...	...	96	77	137	·51
...	...	...	...	...	...	37	22	59	·32
7	9	1	3	3	1	293	262	555	1·14
1	2	...	...	...	...	127	92	219	·56
2	...	1	...	2	2	409	272	681	1·69
...	...	...	...	2	1	113	61	174	·41
1	1	1	1	...	...	53	52	105	·42
1	2	...	...	1	...	21	13	34	·73
1	...	...	...	9	3	151	123	274	1·14
...	...	...	...	...	...	57	56	113	·25
3	1	...	...	1	...	687	593	1,280	2·79
3	2	...	...	...	...	852	636	1,488	3·40
...	1	...	...	...	...	530	471	1,001	2·67
14	8	...	...	...	...	375	349	724	5·10
2	1	...	1	...	1	377	276	653	1·73
...	1	...	...	1	1	193	164	357	·73
105	89	41	34	40	24	6.770	5,280	12,050	1·65

ANNUAL FORM NO. II.—*Showing the* DEATHS
during the

1	2	3	4	5					
Serial Number.	Districts.	Area in square miles.	Average population per square mile.	Number of Deaths registered.			Deaths per		
				Male.	Female.	Total.	Cholera.	Small-pox.	Plague.
1	Bombay City ...	30	38,712	16,393	14,182	30,575	·00	·59	...
	Northern Registration District.								
2	East Khandesh ...	4,598	262	20,179	19,259	39,438	·86	·11	...
3	West Khandesh ...	5,320	138	13,349	12,967	26,316	5·07	·01	...
4	Surat	1,695	409	10,237	9,890	20,127	·07	·04	...
5	Broach	1,582	211	5,394	5,262	10,656	·05	·34	...
6	Kaira	1,617	459	12,693	11,911	24,604	·00	·08	...
7	Panch Mahals ...	1,616	282	6,373	6,044	12,417	·00	·11	...
8	Ahmedabad... ...	3,879	257	19,219	18,612	37,831	...	·11	...
	Central Registration District.								
9	Ahmednagar ...	6,646	148	13,752	12,964	26,716	1·05	·02	...
10	Poona	5,347	212	16,446	15,608	32,054	·03	·02	...
11	Nasik	5,922	169	15,037	14,349	29,386	1·84	·10	...
12	Thana	3,515	238	9,541	8,572	18,113	·51	·03	...
13	Bombay Suburban ...	164	1,092	1,817	1,690	3,507	·06	·05	...
14	Kolaba	2,212	284	7,690	7,276	14,966	·57	·09	...
15	Ratnagiri ...	4,069	320	13,292	13,692	26,984	·14	·11	...
	Southern Registration District.								
16	Belgaum	4,497	239	12,194	11,700	23,894	·02	·01	·20
17	Dharwar	4,582	241	13,841	12,924	26,765	·31	·01	·14
18	Bijapur	5,670	153	9,494	9,012	18,506	·22	·04	·00
19	Kanara	3,965	105	6,052	5,664	11,716	·01	·08	·09
20	Sholapur	4,572	192	13,844	13,207	27,051	·57	·05	·00
21	Satara	4,891	241	16,088	15,498	31,586	1·01	·09	·07
	Total for the Province ...	76,389	234	252,925	240,283	493,208	·61	·11	·03

registered in the DISTRICTS *of the* BOMBAY PROVINCE

year 1937.

6								7		
1,000 OF POPULATION FROM								MEAN RATIO OF DEATHS PER 1,000 DURING PREVIOUS FIVE YEARS.		
Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Injuries.	All other causes.	All Causes.					
					Male.	Female.	Total.	Male.	Female.	Total.
2·01	1·42	11·40	·67	10·24	21·93	34·26	26·33	19·78	29·87	23·38
16·49	1·45	5·81	·27	7·71	32·93	32·46	32·70	30·21	29 89	30·05
12·76	1·25	7·33	·27	9·01	35·69	35·71	35·70	28·64	27·87	28·26
8·93	·91	9·35	·37	7·31	27·27	26·69	26·98	28·11	26·79	27·45
16·01	·80	6·96	·31	7·41	30·84	33·03	31·88	29·65	31·40	30·49
10·36	1·16	11·78	·46	9·33	32·13	34·37	33·17	31·74	32·47	32·08
16·75	·71	4·43	·37	4·95	26·93	27·74	27·32	22·61	23·42	23·00
16·99	1·27	9·53	·37	9·62	36·46	39·48	37·89	32·79	34·11	33·45
5·27	2·50	6·37	·26	11·68	27·62	26·68	27·15	28·08	26·61	27·35
9·63	2·69	5·23	·37	8·76	27·84	27·61	27·73	27·19	26·79	26·99
9·96	1·57	6·45	·35	9·15	29·62	29·24	29·43	28·99	28·80	28·88
6·72	1·32	6·09	·37	6·50	22·16	21·10	21·54	21·32	20·96	21·13
3·61	2·67	4·92	·30	7·97	17·66	22·16	19·58	15·37	18·72	16·84
7·88	1·75	5·57	·28	7·66	24·41	23·80	14·38	24·41	23·56	23·90
5·65	·58	4·24	·31	9·66	19·75	20·72	20·72	20·84	18·95	19·82
5·90	1·99	3·68	·49	9·97	22·18	22·34	22·26	26·81	28·20	27·49
7·91	·83	3·85	·36	10·86	24·47	24·07	24·27	29·22	30·67	29·93
6·69	1·67	3·64	·45	8·58	21·55	21·02	21·29	31·31	31·62	31·46
9·23	2·68	2·57	·52	12·86	28·27	27·79	28·04	28·23	28·39	28·31
8·78	2·28	5·83	·46	12·85	30·53	31·15	30·83	32·94	33·14	33·04
9·26	1·85	3·18	·49	10·85	27·16	26·39	26·77	25·68	25·47	25·58
9·15	1·56	6·22	·39	9·43	27·24	27·79	27·50	26·97	27·54	27·25

ANNUAL FORM NO. III.—DEATHS *registered in the* DIS
during each month

1	2	3				
Number.	Districts.	January.	February.	March.	April.	May.
	A.—DISTRICTS (EXCLUDING TOWNS).					
	Northern Registration District.					
1	East Khándesh	2,794	2,423	2,671	2,969	3,080
2	West Khándesh	1,829	1,456	1,498	1,508	1,809
3	Surat	1,447	1,005	1,408	1,232	1,015
4	Broach	738	569	666	625	580
5	Kaira	1,529	1,402	1,574	1,679	1,474
6	Panch Maháls	844	705	814	790	722
7	Ahmedabad	1,671	1,574	1,569	1,510	1,211
	Central Registration District.					
8	Ahmednagar	2,163	1,720	1,523	1,744	2,080
9	Poona	2,113	1,541	1,637	1,579	1,988
10	Násik	2,132	1,664	1,766	2,129	1,983
11	Thána	2,104	1,404	1,636	1,561	1,192
12	Bombay Suburban	184	129	167	147	134
13	Kolaba	1,356	1,156	1,257	1,183	1,119
14	Ratnágiri	2,471	2,032	2,211	2,267	2,142
	Southern Registration District.					
15	Belgaum	1,720	1,397	1,587	1,807	2,105
16	Dhárwár	2,603	1,756	2,098	1,842	1,786
17	Bijápur	1,607	1,083	1,124	1,058	1,277
18	Kánara	1,254	1,004	1,015	799	684
19	Sholápur	1,751	1,223	1,240	1,217	1,649
20	Sátára	2,261	1,754	1,874	2,363	3,254
	Total for Districts ...	34,571	26,997	29,335	30,189	31,284
	Ratio per mille of population ...	28·38	24·42	24·08	25·54	25·68

TRICTS (*Rural Circles*) *and in the Towns of the* BOMBAY PROVINCE *of the year 1937.*

June.	July.	August.	September.	October.	November.	December.	4 Total Deaths registered during the year.	5 Number.
2,271	2,410	3,843	3,724	3,148	2,899	2,968	35,200	1
1,481	1,955	4,096	3,153	1,960	1,953	2,131	24,829	2
920	934	1,143	1,239	1,307	1,362	1,508	14,520	3
532	578	863	745	906	917	917	8,636	4
1,284	1,520	2,077	1,982	2,039	1,966	1,706	20,232	5
629	708	1,111	1,385	1,282	1,269	1,050	11,309	6
930	1,083	1,872	2,082	2,594	2,855	2,747	21,698	7
1,616	1,989	2,820	2,664	2,672	2,141	1,855	24,987	8
1,565	1,751	2,194	2,656	2,390	2,113	2,072	23,779	9
1,621	2,052	2,955	2,537	2,219	2,120	2,421	25,599	10
1,091	1,020	1,331	1,361	1,301	1,158	1,526	16,685	11
134	139	178	157	153	212	187	1,921	12
957	1,071	1,296	1,440	1,131	1,132	1,391	14,489	13
1,862	1,978	2,078	1,969	2,000	2,016	2,376	25,402	14
1,654	1,672	1,820	1,886	2,059	2,094	2,296	22,097	15
1,397	1,371	1,640	1,698	1,977	2,039	2,501	22,708	16
1,164	1,303	1,382	1,498	1,780	1,596	1,642	16,514	17
737	859	·857	748	905	917	1,181	10,954	18
1,317	1,606	2,093	2,202	2,171	1,574	1,633	19,676	19
2,248	2,279	2,885	3,068	3,045	2,470	2,446	29,947	20
25,410	28,278	38,528	38,194	37,039	34,803	36,554	391,182	
21·50	23·21	31·63	32·31	30·41	29·44	30·01	27·22	

1	2	3				
Number.	Towns.	January.	February.	March.	April.	May.
	B—TOWNS.					
1	Bombay City	2,537	2,179	2,431	2,513	2,629
	East Khandesh District.					
2	Jalgaon	72	60	66	67	78
3	Nasirabad	29	19	18	27	34
4	Yawal	22	22	19	31	32
5	Dharangaon	28	25	27	20	27
6	Erandol	28	26	21	23	29
7	Amalner	50	42	22	30	39
8	Parola	33	22	25	31	33
9	Chalisgaon	47	36	28	33	44
10	Chopda	21	15	18	21	22
11	Bhusawal	20	24	21	48	54
	West Khandesh District.					
12	Dhulia	86	50	56	92	86
13	Nandurbar	54	41	29	43	37
	Surat District.					
14	Surat	431	321	416	456	423
15	Rander	25	23	32	27	31
16	Bulsar	50	29	33	27	43
	Broach District.					
17	Broach	118	98	100	106	100
18	Jambusar	29	21	26	22	17
19	Ankleshwar	37	26	31	22	29
	Kaira District.					
20	Kaira	24	13	12	27	23
21	Mehmedabad	17	24	21	23	26
22	Nadiad	110	100	89	135	112
23	Borsad	57	42	55	39	32
24	Anand	44	39	44	64	35
25	Umreth	47	54	58	57	52
26	Dakore	40	37	36	25	25
27	Kapadvanj	61	45	44	56	41

No. III—*contd.*

							4	5
June.	July.	August.	September.	October.	November.	December.	Total Deaths registered during the year.	Number.
2,366	2,673	2,850	2,436	2,549	2,468	2,944	30,575	1
58	67	102	64	65	77	69	845	2
34	37	52	32	27	40	31	380	3
32	25	36	22	19	27	21	308	4
16	33	52	52	26	42	40	388	5
30	26	29	39	18	15	24	308	6
29	33	76	40	32	40	61	494	7
26	42	77	41	34	27	31	422	8
24	38	38	37	36	18	30	409	9
15	37	35	19	19	17	29	268	10
31	32	82	44	19	19	22	416	11
44	68	103	88	90	85	71	919	12
29	48	66	72	54	42	53	568	13
346	421	498	382	372	347	434	4,847	14
18	36	39	29	21	31	33	345	15
27	29	37	27	37	36	40	415	16
80	106	134	116	123	123	116	1,320	17
30	39	35	28	34	30	26	337	18
23	24	37	28	26	31	49	363	19
17	17	18	33	42	25	32	283	20
26	22	27	26	15	21	17	265	21
79	126	161	125	106	100	84	1,327	22
36	36	54	24	34	31	26	466	23
38	58	48	38	27	35	35	505	24
36	56	71	57	54	35	43	620	25
21	28	26	30	24	29	32	353	26
39	35	56	41	48	36	51	553	27

1	2	3				
Number.	Towns.	January.	February.	March.	April.	May.
	B—TOWNS—*contd.*					
	Panch Mahals District.					
28	Godhra	68	44	63	67	57
29	Dohad	53	42	41	32	34
	Ahmedabad District.					
30	Ahmedabad	1,272	986	1,139	1,409	1,147
31	Dhandhuka	25	17	20	24	23
32	Viramgam	96	61	70	86	61
33	Dholka	40	28	37	37	29
34	Ahmedabad Cantonment ...	4	3	5	.....	3
	Ahmednagar District.					
35	Ahmednagar ...	121	108	101	91	119
36	Sangamner ...	24	20	25	27	28
37	Ahmednagar Cantonment ...	23	20	13	17	21
	Poona District.					
38	Poona City	674	456	601	558	576
39	Poona Suburban	39	33	28	20	40
40	Junnar	3	6	9	14	7
41	Baramati	26	26	26	28	30
42	Lonavala ...	23	18	26	28	24
43	Poona Cantonment	44	22	46	35	36
44	Kirkee do.	48	22	33	21	27
	Nasik District.					
45	Nasik	149	123	119	200	197
46	Trimbak	13	11	9	9	10
47	Igatpuri	9	21	8	11	9
48	Manmad	15	17	3	12	9
49	Yeola	33	39	42	41	56
50	Malegaon	63	59	79	66	69
51	Deolali Cantonment	6	5	1	.....	6
	Thana District.					
52	Bassein	8	11	8	5	14
53	Bhiwandi	37	14	22	31	25
54	Thana	52	37	37	54	44
55	Kalyan	34	28	16	25	25

No. III—*contd.*

							4	5
June.	July.	August.	September.	October.	November.	December.	Total Deaths registered during the year.	Number.
62	43	59	44	40	37	53	637	28
23	28	36	31	28	74	49	471	29
873	1,027	1,423	1,330	1,198	1,243	1,361	14,408	30
15	21	33	17	24	25	22	266	31
57	45	86	83	88	96	77	906	32
18	46	66	47	45	60	56	509	33
3	1	7	10	1	5	2	44	34
101	95	103	132	91	91	80	1,233	35
18	16	37	30	19	22	20	286	36
13	9	19	25	27	10	13	210	37
476	464	511	523	455	627	540	6,461	38
18	22	29	29	34	31	27	350	39
4	11	14	11	12	13	12	116	40
20	32	26	25	40	24	31	334	41
18	18	26	14	26	15	29	265	42
32	40	39	36	48	43	50	471	43
18	22	20	13	26	17	11	278	44
161	106	178	142	129	154	187	1,845	45
8	7	6	6	9	3	6	97	46
9	10	13	14	13	28	18	163	47
8	28	33	11	20	1	12	169	48
36	48	88	57	55	41	39	575	49
40	173	86	69	63	54	45	866	50
9	5	13	12	5	2	8	72	51
16	24	17	28	9	11	15	166	52
25	26	19	21	25	25	37	307	53
28	34	64	52	54	65	54	575	54
32	35	37	46	43	22	37	380	55

1	2	3				
Number.	Towns.	January.	February.	March.	April.	May.
	B—TOWNS—*contd.*					
	Bombay Suburban District.					
56	Bandra	64	71	70	70	65
57	Kurla	73	44	48	67	41
	Kolaba District.					
58	Alibag	12	5	8	6	4
59	Mahad	12	5	8	11	10
60	Panwel	13	13	11	11	15
61	Uran	9	6	6	4	10
	Ratnagiri District.					
62	Vengurla	52	29	38	25	31
63	Ratnagiri	37	18	29	18	21
64	Malwan	68	45	54	33	27
65	Chiplun	25	18	18	26	28
	Belgaum District.					
66	Belgaum	89	72	85	90	74
67	Gokak	20	18	10	25	22
68	Athani	13	11	11	20	21
69	Nipani	12	17	27	15	25
70	Belgaum Cantonment ...	3	1	3	2	5
	Dharwar District.					
71	Dharwar	64	52	63	68	61
72	Hubli	145	114	108	87	107
73	Gadag-Bettigery	134	93	111	122	114
74	Ranebennur	40	30	29	36	33
75	Nawalgund	9	11	10	11	3
	Bijapur District.					
76	Bijapur	61	50	47	49	62
77	Bagalkot	36	27	47	36	34
78	Guledgud	34	29	32	30	27
79	Ilkal	37	20	56	34	26

No. III—*contd.*

							4	5
June.	July.	August.	September.	October.	November.	December.	Total Deaths registered during the year.	Number.
72	76	77	67	74	102	83	891	56
50	73	69	70	61	55	44	695	57
6	14	11	20	5	2	5	98	58
6	4	7	8	9	10	14	104	59
13	9	16	19	16	26	32	194	60
7	12	5	5	10	4	3	81	61
29	46	35	46	42	43	44	460	62
16	21	30	34	23	37	31	315	63
30	43	45	42	43	45	71	546	64
21	26	20	17	21	23	18	261	65
87	62	88	66	73	73	118	997	66
18	15	23	22	29	34	29	265	67
22	12	22	26	23	15	28	224	68
17	16	20	35	23	30	36	273	69
.....	6	6	6	8	8	10	58	70
48	61	76	100	90	85	90	858	71
86	115	109	124	119	106	137	1,357	72
94	100	119	107	105	103	106	1,308	73
22	20	36	33	46	42	56	423	74
3	9	7	14	9	9	16	111	75
58	44	72	80	79	102	70	774	76
27	29	55	44	31	37	47	450	77
14	26	34	27	28	26	27	334	78
16	30	47	29	34	37	48	434	79

1	2	3				
Serial No.	Towns.	January.	February.	March.	April.	May.
	B—TOWNS—*concld.*					
	Kanara District.					
80	Karwar	13	18	16	7	12
81	Kumta	15	13	8	15	9
82	Gokarn	22	16	15	13	14
83	Honawar	9	5	6	3	3
84	Bhatkal	18	13	13	8	7
	Sholapur District.					
85	Sholapur	394	326	396	396	497
86	Barsi	85	77	85	82	120
87	Pandharpur	122	84	113	108	150
	Satara District.					
88	Satara	72	47	40	61	81
89	Wai	13	22	17	27	23
90	Karad	15	12	11	20	67
91	Ashta	13	12	12	18	26
92	Islampur	7	8	13	13	13
	Total for Towns ...	8,979	7,162	8,079	8,680	8,747
	*Ratio per mille for Towns ...	29·77	26·16	26·79	29·66	29·00
	Total for the Province ...	43,550	34,159	37,414	38,869	40,031
	*Ratio per mille for the Province.	28·66	24·76	24·62	26·36	26·34

* The ratios should be calculated with reference to the number of days in each month.

No. III—*concld.*

							4	5
June.	July.	August.	September.	October.	November.	December.	Total Deaths registered during the year.	Number.
6	6	16	13	13	12	10	142	80
9	12	16	21	15	18	17	168	81
9	10	10	14	21	19	20	183	82
11	7	7	4	10	8	11	84	83
6	16	9	13	21	30	31	184	84
332	323	423	467	456	409	492	4,911	85
76	60	114	107	85	69	86	1,046	86
84	108	156	119	132	101	141	1,418	87
61	35	55	69	78	70	68	737	88
14	17	16	22	18	20	15	224	89
17	12	17	19	28	21	17	256	90
24	16	27	18	25	21	18	230	91
14	17	21	17	27	20	22	192	92
7,116	8,156	9,843	8,772	8,508	8,538	9,446	102,026	
24·31	27·04	32·64	29·97	28·21	29·73	31·32	28·67	
32,526	36,434	48,371	46,966	45,547	43,341	46,000	493,208	
22·06	23·92	31·83	31·85	29·97	29·33	30·27	27·50	

ANNUAL FORM NO. IV.—DEATHS *registered according to* AGE *in the during the*

No.	Districts and Towns.	Under one						
		Not exceeding one month.						Total.
		Male.			Female.			
		Under one week.	Over one week.	Total.	Under one week.	Over one week.	Total	
	2	3	4	5	6	7	8	9
	A—DISTRICTS (EXCLUDING TOWNS).							
	Northern Registration District.							
1	East Khándesh	1,233	903	2,136	938	760	1,698	3,834
2	West Khándesh	628	540	1,168	512	445	957	2,125
3	Surat	523	348	871	443	301	744	1,615
4	Broach	303	241	544	244	198	442	986
5	Kaira	423	355	778	441	367	808	1,586
6	Panch Mahál	165	274	439	161	208	369	808
7	Ahmedabad	390	470	860	346	367	713	1,573
	Central Registration District.							
8	Ahmednagar	862	444	1,306	645	382	1,027	2,333
9	Poona	562	414	976	444	331	775	1,751
10	Násik	655	639	1,294	533	531	1,064	2,358
11	Thána	425	297	722	337	216	553	1,275
12	Bombay Suburban	68	29	97	37	22	59	156
13	Kolába	543	352	895	396	269	665	1,560
14	Ratnágiri	614	452	1,066	435	369	804	1,870
	Southern Registration District.							
15	Belgaum	794	560	1,354	639	491	1,130	2,484
16	Dhárwár	746	540	1,286	567	448	1,015	2,301
17	Bijápur	479	494	973	374	378	752	1,725
18	Kánara	544	327	871	442	276	718	1,589
19	Sholápur	641	472	1,113	501	398	899	2,012
20	Sátára	700	521	1,221	632	469	1,101	2,322
	Total for Districts ...	11,298	8,672	19,970	9,067	7,226	16,293	36,263
	Ratio per mille ...				* Popula	tion bei	ng not	available

DISTRICTS (RURAL CIRCLES) AND TOWNS *of the* BOMBAY PROVINCE *year 1937.*

year.

Over one month and not exceeding six months.			Over six months and not exceeding twelve months.			Total.			One and under five years.	
Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.
10	11	12	13	14	15	16	17	18	19	20
1,459	1,252	2,711	1,256	1,088	2,344	4,851	4,038	8,889	4,669	4,956
990	887	1,877	811	760	1,571	2,969	2,604	5,573	3,204	3,459
670	622	1,292	361	360	721	1,902	1,726	3,628	1,359	1,412
471	435	906	383	358	744	1,401	1,235	2,636	1,227	1,281
939	830	1,769	937	847	1,784	2,654	2,485	5,139	2,681	2,553
534	433	967	278	295	573	1,251	1,097	2,348	1,369	1,398
1,188	1,079	2,267	770	815	1,585	2,818	2,607	5,425	2,829	3,000
918	730	1,648	979	881	1,860	3,203	2,638	5,841	2,834	2,691
1,073	874	1,947	947	776	1,723	2,996	2,425	5,421	2,861	2,518
1,045	874	1,919	867	757	1,624	3,206	2,695	5,901	3,161	3,246
502	459	961	234	186	420	1,458	1,198	2,656	1,416	1,465
57	56	113	45	46	91	199	161	360	190	159
434	390	824	265	213	478	1,594	1,268	2,862	1,310	1,322
671	614	1,285	395	307	702	2,132	1,725	3,857	1,825	1,835
974	827	1,801	559	436	995	2,887	2,393	5,280	1,998	2,107
839	698	1,537	607	489	1,096	2,732	2,202	4,934	2,130	2,239
837	692	1,529	371	342	713	2,181	1,786	3,967	1,654	1,711
317	298	615	108	111	219	1,296	1,127	2,423	529	493
1,028	883	1,911	680	563	1,243	2,821	2,345	5,166	2,364	2,419
1,593	1,308	2,901	1,103	887	1,990	3,917	3,296	7,213	3,391	3,424
16,539	14,241	30,780	11,959	10,517	22,476	48,468	41,051	89,519	43,001	43,658

ratios cannot be worked out.

No.	Districts and Towns.	Five and under ten years.		Ten and under 15 years.		15 and under 20 years.	
		Male.	Female.	Male.	Female.	Male.	Female.
1	2	21	22	23	24	25	26
	A—DISTRICTS (EXCLUDING TOWNS)—*contd.*						
	Northern Registration District.						
1	East Khándesh	1,029	1,023	362	398	263	349
2	West Khándesh	884	825	341	318	264	301
3	Surat	315	314	148	178	134	143
4	Broach	173	158	70	73	52	79
5	Kaira	305	297	189	165	202	182
6	Panch Maháls	322	369	134	114	96	115
7	Ahmedabad	430	452	198	192	217	192
	Central Registration District.						
8	Ahmednagar	479	528	244	279	216	364
9	Poona	406	428	203	192	148	260
10	Násik	581	585	307	299	232	335
11	Thána	405	426	216	181	242	349
12	Bombay Suburban	43	39	21	22	31	33
13	Kolába	348	305	151	128	155	197
14	Ratnágiri	299	406	280	308	265	277
	Southern Registration District.						
15	Belgaum	545	595	270	293	191	304
16	Dhárwár	613	553	294	298	220	326
17	Bijápur	418	482	175	209	112	197
18	Kánara	214	211	126	132	123	193
19	Sholápur	478	522	206	204	134	202
20	Sátára	552	613	282	284	232	312
	Total of Districts ...	8,839	9,131	4,217	4,267	3,529	4,710
	Ratio per mille ...			* Population being not available			

*

No. IV—*contd.*

20 and under 30 years.		30 and under 40 years.		40 and under 50 years.		50 and under 60 years.		60 years and upwards.		Total (all ages).		No.
Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	
27	28	29	30	31	32	33	34	35	36	37	38	39
775	1,134	852	898	1,056	759	1,213	820	2,902	2,853	17,972	17,228	1
736	1,007	792	833	867	622	808	599	1,720	1,676	12,585	12,244	2
393	530	457	480	517	392	591	418	1,593	1,518	7,409	7,111	3
146	260	165	203	199	166	252	223	670	603	4,355	4,281	4
522	701	477	588	631	466	834	598	1,977	1,725	10,472	9,760	5
346	438	340	386	443	309	469	318	1,012	1,033	5,782	5,527	6
639	673	555	507	773	591	978	717	1,598	1,732	11,035	10,663	7
588	907	636	541	874	674	904	722	2,887	2,778	12,865	12,122	8
547	834	725	768	815	635	890	711	2,746	2,671	12,337	11,442	9
710	1,005	789	776	822	625	1,013	693	2,283	2,236	13,104	12,495	10
745	905	904	741	1,055	662	981	783	1,351	1,202	8,773	7,912	11
73	118	92	94	86	54	108	76	160	162	1,003	918	12
468	658	625	624	610	457	975	820	1,229	1,245	7,465	7,024	13
941	1,127	868	1,120	996	936	1,150	1,009	3,734	4,169	12,490	12,912	14
621	846	641	654	875	519	989	675	2,255	2,439	11,272	10,825	15
684	981	896	861	1,101	682	1,027	762	2,018	2,089	11,715	10,993	16
417	614	504	479	651	438	713	488	1,617	1,668	8,442	8,072	17
468	617	649	538	770	445	602	499	885	1,037	5,662	5,292	18
413	529	470	491	628	474	622	476	2,025	1,853	10,161	9,515	19
719	994	760	806	891	733	991	769	3,507	3,474	15,242	14,705	20
10,951	14,878	12,197	12,338	14,660	10,639	16,110	12,176	38,169	38,163	200,141	191,041	
ration	s cann	ot be w	orked o	ut.								

No.	Districts and Towns.	Under one						
		Not exceeding one month.						Total.
		Male.			Female.			
		Under one week.	Over one week.	Total.	Under one week.	Over one week.	Total.	
1	2	3	4	5	6	7	8	9
	B—TOWNS.							
1	City of Bombay	1,074	738	1,812	768	611	1,379	3,191
	East Khandesh District.							
2	Jalgaon	29	11	40	7	15	22	62
3	Nasirabad	4	8	12	4	6	10	22
4	Yawal	1	3	4	1	3	4	8
5	Dharangaon	10	6	16	9	7	16	32
6	Erandol	7	6	13	4	3	7	20
7	Amalner	12	4	16	5	4	9	25
8	Parola	9	2	11	8	6	14	25
9	Chalisgaon	8	5	13	7	3	10	23
10	Chopda	6	2	8	1	3	4	12
11	Bhusawal	2	2	4	2	4	6	10
	West Khandesh District.							
12	Dhulia	23	12	35	21	9	30	65
13	Nandurbar	22	10	32	15	12	27	59
	Surat District.							
14	Surat	221	122	343	156	121	277	620
15	Rander	11	10	21	5	5	10	31
16	Bulsar	10	9	19	14	5	19	38
	Broach District.							
17	Broach	27	26	53	19	20	39	92
18	Jambusar	9	2	11	4	4	8	19
19	Ankleshwar	12	6	18	11	7	18	36
	Kaira District.							
20	Kaira	7	3	10	4	9	13	23
21	Mehmedabad	4	4	8	5	7	12	20
22	Nadiad	21	19	40	27	15	42	82
23	Borsad	17	6	23	11	7	18	41
24	Anand	6	3	9	6	4	10	19
25	Umreth	15	7	22	14	13	27	49
26	Dakore	7	4	11	6	5	11	22
27	Kapadvanj	14	9	23	10	13	23	46

No. IV—*contd.*

year.										
Over one month and not exceeding six months.			Over six months and not exceeding twelve months.			Total.			One and under five years.	
Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.
10	11	12	13	14	15	16	17	18	19	20
1,231	1,133	2,364	1,592	1,515	3,107	4,635	4,027	8,662	2,803	2,923
53	25	78	39	42	81	132	89	221	122	98
18	10	28	17	13	30	47	33	80	60	51
8	11	19	13	9	22	25	24	49	38	37
11	13	24	21	16	37	48	45	93	47	58
9	8	17	18	20	38	40	35	75	43	34
16	12	28	23	10	33	55	31	86	62	60
17	17	34	17	23	40	45	54	99	52	80
25	24	49	19	25	44	57	59	116	41	41
10	1	11	8	3	11	26	8	34	28	21
15	5	20	19	25	44	38	36	74	54	49
30	32	62	31	28	59	96	90	186	78	62
32	21	53	29	24	53	93	72	165	62	63
185	216	401	327	320	647	855	813	1,668	362	370
17	14	31	12	15	27	50	39	89	30	27
17	13	30	18	13	31	54	45	99	34	28
66	49	115	86	67	153	205	155	360	106	98
18	24	42	15	10	25	44	42	86	50	37
14	17	31	18	13	31	50	48	98	41	36
8	9	17	14	17	31	32	39	71	28	27
12	11	23	25	16	41	45	39	84	28	32
64	70	134	151	148	299	255	260	515	113	134
22	23	45	37	37	74	82	78	160	43	40
13	13	26	31	26	57	53	49	102	51	51
29	24	53	49	50	99	100	101	201	56	63
10	9	19	25	33	58	46	53	99	36	20
18	23	41	26	36	62	67	82	149	67	69

No.	Districts and Towns.	Five and under ten years.		Ten and under 15 years.		15 and under 20 years.	
		Male.	Female.	Male.	Female.	Male.	Female.
1	2	21	22	23	24	25	26
	B—TOWNS.						
1	City of Bombay	468	558	238	270	319	462
	East Khandesh District.						
2	Jalgaon	14	10	8	5	13	19
3	Nasirabad	8	10	2	2	2	7
4	Yawal	11	13	6	5	3	3
5	Dharangaon...	6	8	6	2	2	5
6	Erandol	8	11	2	...	2	9
7	Amalner	12	7	8	6	7	11
8	Parola	13	9	9	3	4	5
9	Chalisgaon	11	6	5	5	3	10
10	Chopda	10	10	5	3	2	3
11	Bhusawal	11	5	5	8	7	16
	West Khandesh District.						
12	Dhulia	25	19	12	12	13	26
13	Nandurbar	11	13	8	8	4	10
	Surat District.						
14	Surat	62	60	20	63	65	89
15	Rander	6	2	5	6	1	8
16	Bulsar	11	7	1	2	6	10
	Broach District.						
17	Broach	22	17	17	17	24	27
18	Jambusar	5	5	1	6	3	6
19	Ankleshwar...	4	11	4	5	1	4
	Kaira District.						
20	Kaira	8	3	1	4	...	4
21	Mehmedabad	4	9	1	2	...	...
22	Nadiad	10	12	8	8	16	21
23	Borsad	5	7	7	2	1	11
24	Anand	7	6	1	2	6	8
25	Umreth	8	7	5	3	10	13
26	Dakore	3	...	2	1	5	6
27	Kapadvanj	9	3	6	9	3	9

No. IV—*contd.*

20 and under 30 years.		30 and under 40 years.		40 and under 50 years.		50 and under 60 years.		60 years and upwards.		Total (all ages).		No.
Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	
27	28	29	30	31	32	33	34	35	36	37	38	39
1,494	1,649	1,575	1,135	1,549	627	1,232	636	2,080	1,895	16,393	14,182	1
21	31	31	32	26	11	43	17	76	47	486	359	2
7	12	10	7	5	4	13	10	43	47	197	183	3
10	16	7	4	9	1	14	6	39	37	162	146	4
11	21	7	11	17	3	10	7	35	39	189	199	5
1	14	8	11	2	7	8	2	32	39	146	162	6
12	32	24	10	24	15	9	18	52	39	265	229	7
4	22	6	9	8	11	6	6	41	35	188	234	8
9	19	17	9	9	9	13	7	41	38	206	203	9
13	13	8	11	7	7	15	10	33	35	147	121	10
18	25	29	14	13	8	13	9	33	25	221	195	11
40	60	39	30	40	17	33	18	104	105	480	439	12
14	29	12	12	25	14	18	14	37	49	284	284	13
133	238	167	142	216	116	229	147	319	381	2,428	2,419	14
9	12	7	13	13	11	18	13	35	40	174	171	15
21	23	16	14	15	14	25	14	43	32	226	189	16
37	65	45	35	64	46	76	50	96	118	692	628	17
7	12	6	10	13	9	18	17	22	24	169	168	18
3	12	10	17	14	4	14	9	37	39	178	185	19
12	13	11	9	10	8	21	7	27	19	150	133	20
6	5	7	2	13	7	21	6	18	20	143	122	21
26	58	35	34	46	18	60	37	96	80	665	662	22
7	22	16	15	14	13	18	23	27	35	220	246	23
34	30	35	19	32	14	24	8	43	32	286	219	24
15	27	18	21	24	19	31	22	36	41	303	317	25
13	10	20	10	27	11	18	14	29	29	199	154	26
15	29	15	22	12	17	18	15	43	43	255	298	27

No.	Districts and Towns.	Under one						
		Not exceeding one month.						Total.
		Male.			Female.			
		Under one week.	Over one week.	Total.	Under one week.	Over one week.	Total.	
1	2	3	4	5	6	7	8	9
	B—TOWNS—*contd.*							
	Panch Mahals District.							
28	Godhra	31	13	44	36	3	39	83
29	Dohad	12	13	25	5	8	13	38
	Ahmedabad District.							
30	Ahmedabad...	447	262	709	388	257	645	1,354
31	Dhandhuka...	7	7	14	3	...	3	17
32	Viramgaon	32	15	47	18	13	31	78
33	Dholka	12	9	21	12	11	23	44
34	Ahmedabad Cantonment ...	2	1	3	2	2	4	7
	Ahmednagar District.							
35	Ahmednagar	51	13	64	51	9	60	124
36	Sangamner	7	6	13	7	...	7	20
37	Ahmednagar Cantonment ...	1	2	3	3	3	6	9
	Poona District.							
38	Poona City	197	121	318	137	107	244	562
39	Poona Suburban	10	8	18	10	3	13	31
40	Baramati	11	7	18	5	7	12	30
41	Lonavla	15	2	17	9	1	10	27
42	Junnar	...	...	...	...	3	3	3
43	Poona Cantonment	4	3	7	5	2	7	14
44	Kirkee Cantonment	12	7	19	8	4	12	31
	Nasik District.							
45	Nasik	21	20	41	20	9	29	70
46	Trimbak	2	5	7	...	2	2	9
47	Igatpuri	3	2	5	2	1	3	8
48	Manmad	2	2	4	1	3	4	8
49	Yeola	6	9	15	4	4	8	23
50	Malegaon	24	24	48	15	20	35	83
51	Deolali Cantonment	1	2	3	...	1	1	4

No. IV—*contd.*

year.

Over one month and not exceeding six months.			Over six months and not exceeding twelve months.			Total.			One and under five years.	
Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.
10	11	12	13	14	15	16	17	18	19	20
27	17	44	36	31	67	107	87	194	67	66
19	18	37	23	17	40	67	48	115	53	44
778	691	1,469	1,049	1,041	2,090	2,536	2,377	4,913	1,441	1,585
11	7	18	18	12	30	43	22	65	27	27
57	52	109	40	38	78	144	121	265	78	105
29	26	55	23	24	47	73	73	146	60	62
1	1	2	5	1	6	9	6	15	6	3
70	38	108	66	53	119	200	151	351	128	108
5	5	10	3	13	16	21	25	46	11	12
8	3	11	11	6	17	22	15	37	25	17
368	348	716	293	254	547	979	846	1,825	739	689
11	15	26	16	16	32	45	44	89	48	54
16	12	28	17	14	31	51	38	89	33	21
16	5	21	10	5	15	43	20	63	14	27
2	...	2	2	...	2	4	3	7	4	5
10	6	16	10	12	22	27	25	52	39	36
12	16	28	13	15	28	44	43	87	27	32
55	40	95	68	60	128	164	129	293	192	174
2	1	3	6	4	10	15	7	12	7	10
2	2	4	5	6	11	12	11	23	16	15
3	4	7	8	3	11	15	11	26	18	13
19	15	34	29	23	52	63	46	109	62	60
31	30	61	24	45	69	103	110	213	123	86
4	3	7	1	4	5	8	8	16	12	3

No.	Districts and Towns.	Five and under ten years.		Ten and under 15 years.		15 and under 20 years.	
		Male.	Female.	Male.	Female.	Male.	Female.
1	2	21	22	23	24	25	26
	B—TOWNS—*contd.*						
	Panch Mahals District.						
28	Godhra	9	9	6	9	11	15
29	Dohad	11	19	2	5	8	14
	Ahmedabad District.						
30	Ahmedabad...	176	170	99	109	121	217
31	Dhandhuka	4	3	2	3	2	3
32	Viramgaon	23	11	8	7	10	10
33	Dholka	10	4	10	8	7	3
34	Ahmedabad Cantonment ...	1	...	...	...	...	1
	Ahmednagar District.						
35	Ahmednagar	16	19	14	22	14	29
36	Sangamner	4	3	3	7	5	11
37	Ahmednagar Cantonment ...	1	1	5	5	2	5
	Poona District.						
38	Poona City	112	115	53	58	55	124
39	Poona Suburban	5	9	1	2	4	5
40	Baramati	5	6	3	3	2	4
41	Lonavla	5	7	2	3	4	2
42	Junnar	...	1	3	...	1	1
43	Poona Cantonment	7	7	4	4	5	11
44	Kirkee Cantonment	8	...	1	2	...	6
	Nasik District.						
45	Nasik	48	38	24	30	23	47
46	Trimbak	1	2	1	3	...	1
47	Igatpuri	2	3	2	2	1	2
48	Manmad	6	2	...	4	1	4
49	Yeola	7	8	8	12	3	22
50	Malegaon	11	18	15	24	8	18
51	Deolali Cantonment	2	2	...	...	...	1

No. IV—*contd.*

20 and under 30 years.		30 and under 40 years.		40 and under 50 years.		50 and under 60 years.		60 years and upwards.		Total (all ages).		No.
Male.	Fe. male.	Male.	Fe-male.	Male.	Fe-male.	Male.	Fe-male.	Male.	Fe-male.	Male.	Fe-male.	
27	28	29	30	31	32	33	34	35	36	37	38	39
19	34	20	19	34	10	26	13	39	37	338	299	28
15	26	18	14	16	10	21	9	42	29	253	218	29
592	765	440	399	520	285	528	301	838	909	7,291	7,117	30
4	12	6	9	8	4	12	10	30	35	138	128	31
25	45	26	17	38	27	46	30	69	66	467	439	32
17	17	11	10	9	9	16	16	48	46	261	248	33
4	...	3	2	...	2	3	1	1	2	27	17	34
38	53	38	32	39	38	38	28	123	105	648	585	35
10	24	4	19	13	12	18	11	37	36	126	160	36
5	8	4	5	12	10	11	4	26	27	113	97	37
151	327	176	223	173	165	223	134	531	588	3,192	3,269	38
12	11	13	6	13	6	8	7	26	31	175	175	39
13	9	10	15	11	7	12	7	43	41	183	151	40
6	13	9	16	15	12	9	9	23	26	130	135	41
2	11	6	8	8	3	6	7	21	22	55	61	42
9	33	17	23	36	16	31	16	70	55	245	226	43
6	14	9	10	7	4	6	7	21	31	129	149	44
67	90	72	76	97	73	76	52	199	174	962	883	45
1	4	4	5	2	3	7	2	14	8	52	45	46
5	11	7	9	10	6	9	10	15	15	79	84	47
3	11	4	2	9	10	14	6	15	21	85	84	48
20	35	22	18	13	12	22	13	57	72	277	298	49
12	34	22	36	31	26	26	17	89	57	440	426	50
3	4	...	3	2	3	4	...	7	10	38	34	51

No.	Districts and Towns.	Under one						
		Not exceeding one month.						
		Male.			Female.			Total.
		Under one week.	Over one week.	Total.	Under one week.	Over one week.	Total.	
1	2	3	4	5	6	7	8	9
	B—TOWNS—*contd.*							
	Thana District.							
52	Thana	12	11	23	9	5	14	37
53	Bhiwandi	11	3	14	7	3	10	24
54	Kalyan	9	9	18	4	3	7	25
55	Bassein	13	1	14	6	2	8	22
	Bombay Suburban District.							
56	Bandra	51	19	70	38	9	47	117
57	Kurla	21	13	34	27	9	36	70
	Kolaba District,							
58	Alibag	1	...	1	1	1	2	3
59	Mahad	5	...	5	...	...	...	5
60	Panwel	10	...	10	3	...	3	13
61	Uran	1	...	1	2	1	3	4
	Ratnagiri District.							
62	Ratnagiri	3	...	3	3	1	4	7
63	Vengurla	5	7	12	12	7	19	31
64	Malwan	18	9	27	17	5	22	49
65	Chiplun	9	3	12	6	4	10	22
	Belgaum District.							
66	Belgaum	7	4	11	9	7	16	27
67	Gokak	6	4	10	1	4	5	15
68	Athni	1	...	1	3	2	5	6
69	Nipani	2	3	5	2	...	2	7
70	Belgaum Cantonment ...	3	...	3	1	...	1	4
	Dharwar District.							
71	Dharwar	16	10	26	7	6	13	39
72	Hubli	8	12	20	7	10	17	37
73	Gadag-Betigeri	54	25	79	40	18	58	137
74	Ranebennur	4	11	15	2	3	5	20
75	Nawalgund	3	1	4	4	1	5	9

No. IV—*contd.*

year.

Over one month and not exceeding six months.			Over six months and not exceeding twelve months.			Total.			One and under five years.	
Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.
10	11	12	13	14	15	16	17	18	19	20
23	12	35	9	17	26	55	43	98	60	39
12	6	18	8	6	14	34	22	56	26	22
8	13	21	9	6	15	35	26	61	24	31
4	4	8	1	2	3	19	14	33	11	...
25	30	55	24	22	46	119	99	218	72	72
24	23	47	34	33	67	92	92	184	70	73
6	4	10	2	3	5	9	9	18	5	6
6	...	6	1	4	5	12	4	16	5	10
8	7	15	3	5	8	21	15	36	10	7
...	4	4	2	1	3	3	8	11	8	11
7	3	10	1	1	2	11	8	19	5	13
13	9	22	3	5	8	28	33	61	22	27
12	8	20	2	5	7	41	35	76	26	25
7	11	18	5	7	12	24	28	52	15	19
31	23	54	30	29	59	72	68	140	74	75
17	11	28	11	6	17	38	22	60	18	27
4	9	13	3	5	8	8	19	27	20	19
20	12	32	5	4	9	30	18	48	14	30
3	2	5	...	...	.....	6	3	9	2	1
26	19	45	22	10	32	74	42	116	69	68
29	34	63	31	29	60	80	80	160	136	115
68	45	113	59	38	97	206	141	347	134	123
23	15	38	10	14	24	48	34	82	48	60
1	4	5	2	2	4	7	11	18	5	9

No.	Districts and Towns.	Five and under ten years.		Ten and under 15 years.		15 and under 20 years.	
		Male.	Female.	Male.	Female.	Male.	Female.
1	2	21	22	23	24	25	26
	B—TOWNS—*contd.*						
	Thana District.						
52	Thana	19	13	11	8	6	14
53	Bhiwandi	1	3	2	6	6	7
54	Kalyan	2	11	5	4	6	11
55	Bassein	...	...	4	1	5	3
	Bombay Suburban District.						
56	Bandra	12	9	14	14	14	18
57	Kurla	25	27	7	7	14	14
	Kolaba District.						
58	Alibag	2	...	1	2	...	
59	Mahad	1	2	2	...	3	4
60	Panwel	2	5	3	1	5	6
61	Uran	1	2	1	...	...	3
	Ratnagiri District						
62	Ratnagiri	4	3	3	3	7	8
63	Vengurla	5	4	...	7	4	7
64	Malwan	4	4	2	5	7	6
65	Chiplun	1	5	3	2	5	5
	Belgaum District.						
66	Belgaum	20	18	8	16	17	29
67	Gokak	7	5	3	4	5	4
68	Athni	3	4	3	1	2	5
69	Nipani	3	7	4	3	2	7
70	Belgaum Cantonment ...	1	...	...	...	1	3
	Dharwar District.						
71	Dharwar	20	30	12	19	23	14
72	Hubli	28	30	11	17	14	28
73	Gadag-Betigeri	19	21	8	14	6	30
74	Ranebennur	9	11	3	10	4	4
75	Nawalgund	1	3	...	...	1	2

No. IV—*contd.*

20 and under 30 years.		30 and under 40 years.		40 and under 50 years.		50 and under 60 years.		60 years and upwards.		Total (all ages).		No.
Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	
27	28	29	30	31	32	33	34	35	36	37	38	39
29	33	30	22	28	22	22	15	43	54	312	263	52
25	21	15	13	12	10	13	7	36	26	170	137	53
18	34	24	25	14	12	17	8	41	32	186	194	54
8	10	12	10	10	13	8	4	23	11	100	66	55
33	40	24	35	46	19	47	35	79	90	460	431	56
22	40	22	27	14	16	39	20	49	25	354	341	57
5	8	5	4	5	2	8	4	12	11	51	47	58
4	5	3	6	4	7	7	7	3	11	44	60	59
9	13	9	9	12	8	12	6	16	25	99	95	60
2	4	3	3	3	4	3	6	7	9	31	50	61
9	25	27	22	24	13	30	15	46	39	166	145	62
22	23	30	14	33	17	28	16	80	60	252	208	63
13	42	26	25	22	31	31	19	88	94	260	286	64
11	19	7	10	11	12	11	7	36	30	124	137	65
48	69	47	46	60	23	39	25	127	96	512	465	66
7	14	9	10	10	8	10	5	28	31	135	130	67
9	14	9	7	12	8	13	7	32	29	111	113	68
14	18	3	9	7	7	15	6	40	36	132	141	69
2	3	3	4	2	1	5	4	10	7	32	26	70
38	44	38	34	45	26	47	18	91	106	457	401	71
60	71	54	55	74	46	73	39	181	165	711	646	72
31	63	57	53	53	34	58	27	128	102	700	608	73
12	25	11	15	17	14	22	7	34	35	208	215	74
5	4	3	6	7	4	3	...	18	22	50	61	75

No.	Districts and Towns.	Under one						
		Not exceeding one month.						Total.
		Male.			Female.			
		Under one week.	Over one week.	Total.	Under one week.	Over one week.	Total.	
1	2	3	4	5	6	7	8	9
	B.—TOWNS—*concld.*							
	Bijapur District.							
76	Bijapur	31	19	50	19	12	31	81
77	Bagalkot	12	13	25	4	2	6	31
78	Guledgud	6	8	14	3	2	5	19
79	Ilkal	2	7	9	3	1	4	13
	Kanara District.							
80	Karwar	3	...	3	2	1	3	6
81	Kumta	5	2	7	4	1	5	12
82	Gokarn	6	4	10	8	2	10	20
83	Honawar	...	2	2	1	1	2	4
84	Bhatkal	...	2	2	4	3	7	9
	Sholapur District.							
85	Sholapur	154	113	267	128	86	214	481
86	Barsi	16	23	39	18	19	37	76
87	Pandharpur	44	27	71	24	24	48	119
	Satara District.							
88	Satara	24	4	28	12	2	14	42
89	Wai	6	1	7	...	1	1	8
90	Karad	1	3	4	1	4	5	9
91	Ashta	6	3	9	5	3	8	17
92	Islampur	2	1	3	2	1	3	6
	Total for Towns ...	3,089	1,969	5,058	2,334	1,660	3,994	9,052
	Ratio per mille ...				Popula	tion be	ing not	available
	Total for the Province ...	14,387	10,641	25,028	11,401	8,886	20,287	45,315
	Ratio per mille ...						Not	to be

No. IV—*concld.*

year.

Over one month and not exceeding six months.			Over six months and not exceeding twelve months.			Total.			One and under five years.	
Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.
10	11	12	13	14	15	16	17	18	19	20
46	30	76	22	27	49	118	88	206	70	63
17	23	40	19	12	31	61	41	102	42	53
15	16	31	13	16	29	42	37	79	24	27
27	20	47	9	6	15	45	30	75	56	69
1	3	4	2	...	2	6	6	12	7	2
3	3	6	1	2	3	11	10	21	9	17
3	5	8	...	2	2	13	17	30	13	11
1	...	1	2	...	2	5	2	7	5	8
4	4	8	5	3	8	11	14	25	15	11
288	248	536	183	185	368	738	647	1,385	649	732
77	61	138	58	54	112	174	152	326	121	134
111	118	229	71	56	127	253	222	475	135	155
25	23	48	32	20	52	85	57	142	79	82
12	6	18	8	7	15	27	14	41	15	19
7	5	12	4	4	8	15	14	29	16	17
11	4	15	3	2	5	23	14	37	21	15
5	4	9	3	1	4	11	8	19	13	11
4,554	4,063	8,617	5,168	4,902	10,070	14,780	12,975	27,739	9,934	10,171
ratios	cannot	be worked out.								
21,093	18,304	39,397	17,127	15,419	32,546	63,248	54,010	117,258	52,935	53,859
given.						168·02	152·98	160·74	50·64	50·36

No.	Districts and Towns.	Five and under ten years.		Ten and under 15 years.		15 and under 20 years.	
		Male.	Female.	Male.	Female.	Male.	Female.
1	2	21	22	23	24	25	26
	B—TOWNS—*concld.*						
	Bijapur District.						
76	Bijapur	19	7	10	9	6	19
77	Bagalkot	10	9	6	5	3	8
78	Guledgud	4	5	1	6	7	4
79	Ilkal	12	7	4	4	1	4
	Kanara District.						
80	Karwar	1	3	2	4	1	7
81	Kumta	1	2	1	1	1	1
82	Gokarn	6	6	5	4	3	5
83	Honawar	2	1	...	...	1	1
84	Bhatkal	8	5	2	2	3	3
	Sholapur District.						
85	Sholapur	99	100	39	56	42	110
86	Barsi	25	17	11	16	10	12
87	Pandharpur	28	17	11	10	7	20
	Satara District.						
88	Satara	10	11	7	9	9	13
89	Wai	4	5	3	3	2	4
90	Karad	8	5	3	5	5	5
91	Ashta	4	3	2	7	...	6
92	Islampur	4	2	3	1	1	8
	Total for Towns ..	1,679	1,709	878	1,066	1,070	1,820
	Ratio per mile ...			Population not being available			
	Total for the Province ...	10,518	10,840	5,095	5,333	4,599	6,530
	Ratio per millle ...	8·76	9·76	4·70	5·49	5·65	8·14

No. IV—*concld.*

20 and under 30 years.		30 and under 40 years.		40 and under 50 years.		50 and under 60 years.		60 years and upwards.		Total (all ages).		No.
Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	
27	28	29	30	31	32	33	34	35	36	37	38	39
25	40	27	25	31	11	38	15	75	78	419	355	76
17	19	20	14	19	10	17	10	43	43	238	212	77
7	19	13	11	14	10	22	13	38	30	172	162	78
6	20	12	18	13	8	19	9	55	42	223	211	79
3	9	12	6	12	6	12	5	22	16	78	64	80
13	7	8	8	6	8	7	6	23	28	80	88	81
14	11	5	5	10	6	5	5	18	21	92	91	82
6	2	1	7	1	6	5	3	16	12	42	42	83
5	11	12	6	8	4	14	6	20	25	98	87	84
145	221	106	146	126	83	114	80	359	319	2,417	2,494	85
27	45	24	28	35	19	25	14	91	66	543	503	86
28	48	46	39	54	27	47	39	114	118	723	695	87
18	36	24	29	22	28	31	19	81	87	366	371	88
5	12	9	13	9	7	19	6	24	24	117	107	89
14	15	12	10	17	11	8	8	38	30	136	120	90
7	5	5	7	5	5	11	6	47	37	125	105	91
2	7	11	9	6	5	12	3	39	36	102	90	92
3,809	5,263	3,949	3,479	4,276	2,405	4,157	2,406	8,252	7,964	52,784	49,242	
ratios cannot be worked out.												
14,760	20,141	16,146	15,817	18,936	13,044	20,267	14,582	46,421	46,127	252,925	240,283	
8·78	12·53	11·26	13·30	20·74	16·63	39·47	30·59	138·93	135·78	27·24	27·79	

ANNUAL FORM No. V.—DEATHS *registered according*
PROVINCE *during*

1	2				
No.	Districts.	Muhammadans.		Hindus.	
		Male.	Female.	Male.	Female.
1	Bombay City	3,014	2,455	11,660	10,229
	Northern Registration District.				
2	East Khandesh	1,705	1,541	18,451	17,705
3	West Khandesh	463	500	12,867	12,441
4	Surat	877	908	9,121	8,773
5	Broach	1,075	1,076	4,264	4,131
6	Kaira	1,124	1,094	11,242	10,525
7	Panch Mahals	313	281	6,033	5,739
8	Ahmedabad	2,012	2,056	16,643	16,033
	Central Registration District.				
9	Ahmednagar	623	644	12,982	12,213
10	Poona	725	693	15,591	14,777
11	Nasik	606	598	14,407	13,723
12	Thana	385	346	8,883	7,974
13	Bombay Suburban	158	157	1,388	1,278
14	Kolaba	377	397	7,271	6,853
15	Ratnagiri	888	965	12,320	12,662
	Southern Registration District.				
16	Belgaum	905	877	10,748	10,323
17	Dharwar	1,907	1,873	11,753	10,869
18	Bijapur	1,138	1,084	8,324	7,896
19	Kanara	415	378	5,415	5,089
20	Sholapur	1,044	1,079	12,697	12,043
21	Satara	580	494	15,360	14,861
	Total for the Province ...	20,334	19,496	227,420	266,137

N.B.—This and all the other Statements refer to Indians only and not to Europeans. Hindus

to CLASSES *and* SEX *in the Districts of the* BOMBAY
the year 1937.

3

NUMBER OF DEATHS REGISTERED.

Jains.		Christians.		Parsis.		Other Classes.	
Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.
316	262	794	737	475	392	134	107
11	9	5	3	...	...	7	1
6	7	10	18	1	1	2	.....
113	104	18	11	108	94	...	.....
29	29	12	8	14	18	...	.....
58	54	268	237	1	...	...	1
14	12	12	11	1	...	...	1
445	429	96	73	14	15	9	6
5	7	142	98	...	1	...	1
17	29	73	75	8	7	32	27
8	8	15	14	1	6	...	...
6	6	246	232	17	7	4	7
21	16	211	212	13	9	26	18
5	1	16	13	3	...	18	12
13	7	71	58	...	...	...	...
476	442	54	54	1	...	10	4
107	116	68	66	1	...	5	...
14	24	10	8	...	...	8	...
26	18	194	179	...	...	2	...
77	57	15	22	5	2	6	4
124	125	6	14	2	2	16	2
1,891	1,762	2,336	2,143	665	554	279	191

include Hindus of all castes. "Other Classes" include Buddhists, Sikhs, Jews and all others.

1	2							
No.	Districts.	Muhammadans.		Hindus.		Jains.		
		Male.	Female.	Male.	Female.	Male.	Female.	
1	Bombay City	20·94	37·58	23·06	35·98	35·12	76·47	
	Northern Registration District.							
2	East Khandesh	26·04	25·01	34·16	33·69	2·12	2·03	
3	West Khandesh	22·47	26·32	35·44	35·17	2·20	3·25	
4	Surat	26·14	27·67	27·63	26·93	20·64	20·68	
5	Broach	25·61	27·93	33·19	35·43	18·86	22·59	
6	Kaira	28·74	30·93	33·21	35·70	18·93	18·34	
7	Panch Mahals	16·60	16·90	38·40	40·80	14·37	12·31	
8	Ahmedabad	30·96	40·64	40·01	44·32	39·78	40·92	
	Central Registration District.							
9	Ahmednagar	24·36	26·65	29·03	27·92	·62	·99	
10	Poona	25·08	29·62	28·61	28·08	2·49	5·62	
11	Nasik	20·44	22·49	30·71	30·60	1·82	2·18	
12	Thana	18·24	20·79	22·78	21·46	3·57	7·81	
13	Bombay Suburban	12·05	19·38	19·67	25·04	18·26	32·85	
14	Kolaba	24·35	25·57	24·51	23·15	42·09	22·73	
15	Ratnagiri	23·50	19·71	21·73	19·80	12·05	6·69	
	Southern Registration District.							
16	Belgaum	18·98	19·43	22·71	22·84	19·03	19·51	
17	Dharwar	23·31	24·45	24·83	20·41	18·36	23·71	
18	Bijapur	21·01	20·92	21·65	21·07	8·16	16·52	
19	Kanara	27·59	24·24	28·57	28·46	42·97	36·90	
20	Sholapur	27·69	31·02	27·03	31·38	18·13	15·66	
21	Satara	26·39	23·77	27·43	26·68	13·76	15·36	
	Total for the Province ...	23·76	26·89	28·33	28·61	17·35	19·65	

No. V—*concld.*

4

RATIO OF DEATHS PER 1,000 OF POPULATION.

Christians.		Parsis.		Other Classes.	
Male.	Female.	Male.	Female.	Male.	Female.
15·43	25·19	15·53	14·43	19·66	23·55
4·16	2·89	...	...	12·63	1·93
11·44	23·68	8·26	16·66	·46	...
14·14	9·06	21·96	16·58	...	...
7·65	5·89	14·74	15·79	...	...
19·17	18·08	22·73	...	...	2·90
6·05	5·62	6·94	...	...	·02
28·61	27·10	18·11	24·15	45·92	45·11
8·33	5·81	...	14·92	...	2·93
9·39	9·25	4·64	4·03	53·96	49·18
·93	·91	·70	3·76	...	...
15·25	15·13	11·92	4·39	12·94	25·09
13·39	14·23	6·77	4·75	72·83	79·65
24·69	22·45	25·21	...	18·97	11·86
20·83	15·62	...	...	...	...
14·42	14·14	12·82	...	204·08	500·00
15·26	16·69	8·70	...	27·47	...
16·86	11·98	...	...	2000·00	...
21·84	20·29	...	...	...	...
8·94	13·08	20·74	12·82	300·00	666·67
4·38	10·79	7·43	8·70	640·00	166·67
14·59	16·06	15·02	13·42	3·60	2·60

ANNUAL FORM No. VI.—DEATHS *registered from*
BOMBAY PROVINCE
Details regarding Births

1	2	3	4			
			Births.			
No.	Districts and Towns.	Population according to Census of 1931.	Male.	Female.	Total.	Birth-rate.
	A—DISTRICTS (EXCLUDING TOWNS).					
	Northern Registration District.					
1	East Khándesh	1,014,233	25,682	24,549	50,231	49·53
2	West Khándesh	680,254	18,361	17,251	35,612	52·35
3	Surat	562,852	13,351	12,628	25,979	46·16
4	Broach	276,125	7,142	6,868	14,010	50·74
5	Káira	626,955	14,938	13,437	28,375	45·26
6	Panch Maháls	397,323	8,405	8,026	16,431	41·35
7	Ahmedabad	644,195	15,183	14,105	29,288	45·46
	Central Registration District.					
8	Ahmednagar	915,322	18,694	17,527	36,221	39·57
9	Poona	904,827	17,264	15,747	33,011	36·48
10	Násik	868,103	20,428	18,934	39,362	45·34
11	Thána	760,210	11,904	11,097	23,001	30·26
12	Bombay Suburban	103,462	1,185	1,068	2,253	22·28
13	Kolába	595,760	11,966	11,130	23,096	38·77
14	Ratnágiri	1,215,590	21,813	20,643	42,456	34·92
	Southern Registration District.					
15	Belgáum	980,783	21,995	21,147	43,142	43·99
16	Dhárwár	902,002	18,935	18,086	37,021	41·04
17	Bijápur	782,853	17,408	16,665	34,073	43·52
18	Kánara	361,760	6,582	6,080	12,662	35·00
19	Sholápur	675,796	14,440	14,052	28,492	42·16
20	Sátára	1,105,106	24,075	22,932	47,007	42·54
	Total of Districts ...	14,373,511	309,751	291,972	601,723	41·86

different causes in the DISTRICTS *and* TOWNS *of the during the year 1937.*
also shown, column 4.

5	6	7	8	9	10	11	
						Injuries.	
Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Suicide.	
						Male.	Female.
906	133	...	18,074	1,460	6,148	15	12
3,691	10	...	8,921	816	5,101	3	7
55	25	...	5,627	200	5,237	15	7
6	114	...	4,617	229	1,948	4	2
1	18	...	5,659	712	7,725	8	10
.....	45	...	6,848	308	1,852	7	5
.....	42	...	13,966	387	3,590	4	10
996	16	...	4,911	2,303	5,745	6	4
39	29	...	9,242	2,447	4,791	6	4
1,607	95	1	8,902	1,290	5,575	6	5
381	25	...	5,416	983	4,771	23	17
10	6	...	519	284	450	3	...
359	41	...	4,784	1,083	3,411	4	3
188	130	...	7,004	712	5,255	6	1
19	8	214	5,939	2,052	3,539	37	46
333	5	127	7,710	722	3,381	37	27
152	35	1	5,425	1,405	2,814	36	20
3	31	32	3,670	1,013	974	14	8
459	36	...	6,717	1,268	2,162	12	6
1,125	105	79	10,558	2,081	3,504	16	14
10,332	949	454	144,509	21,755	77,973	262	268

1	2	11				12	13
		INJURIES—*contd.*					
No.	Districts and Towns.	Wounding or Accident.	Snake-bite, or killed by wild beasts.	Rabies.	Total.	All other causes.	Total deaths from all causes.
	A—DISTRICTS (EXCLUDING TOWNS).						
	Northern Registration District.						
1	East Khandesh	197	31	6	261	8,218	35,200
2	West Khandesh	106	66	2	184	6,106	24,829
3	Surat	150	18	1	191	3,185	14,520
4	Broach	55	11	3	75	1,647	8,636
5	Kaira	202	35	24	279	5,838	20,232
6	Panch Mahals	120	25	3	160	2,096	11,309
7	Ahmedabad	119	38	23	194	3,519	21,698
	Central Registration District.						
8	Ahmednagar	184	44	2	240	10,774	24,987
9	Poona	287	55	7	359	6,872	23,779
10	Nasik	218	53	6	288	7,841	25,599
11	Thana	152	100	4	296	4,813	16,685
12	Bombay Suburban	34	2	...	39	613	1,921
13	Kolaba	125	30	1	163	4,648	14,489
14	Ratnagiri	182	196	1	386	11,727	25,402
	Southern Registration District.						
15	Belgaum	338	49	5	475	9,851	22,097
16	Dharwar	235	35	6	340	10,090	22,708
17	Bijapur	253	45	1	355	6,327	16,514
18	Kanara	150	22	2	196	5,035	10,954
19	Sholapur	241	33	9	301	8,733	19,676
20	Satara	355	144	9	538	11,957	29,947
	Total of Districts ...	3,703	1,032	115	5,320	129,890	391,182

No. VI—*contd.*

14

RATIO OF DEATHS PER 1,000 OF POPULATION.

Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Injuries.	All other causes.	From all causes.	
								For the year.	Mean of previous five years.
·89	·13	...	17·82	1·44	6·06	·26	8·10	34·70	31·58
5·43	·01	...	13·11	1·20	7·51	·27	8·97	36·50	28·75
·10	·04	...	10·00	·35	9·30	·34	5·66	25·79	25·20
0·2	·41	...	16·72	·83	7·06	·27	5·96	31·27	30·08
...	·03	...	9·03	1·13	12·32	·45	9·31	32·27	31·41
...	·12	...	17·23	·77	4·66	·40	5·28	28·46	23·82
...	·07	...	21·68	·60	5·57	·30	5·46	33·68	26·95
1·09	·02	...	5·37	2·52	6·26	·26	11·77	27·29	27·72
·04	·03	...	10·21	2·71	5·30	·40	7·59	26·28	25·67
1·85	·11	...	10·25	1·51	6·42	·33	9·04	29·49	29·41
·50	·03	...	7·13	1·29	6·28	·39	6·33	21·94	21·49
·10	·06	...	5·13	2·82	4·45	·38	6·05	18·99	16·66
·60	·07	...	8·02	1·82	5·73	·27	7·81	24·32	23·04
·16	·12	...	5·73	·60	4·31	·31	9·64	20·88	19·68
·02	·01	·22	6·06	2·09	3·61	·48	10·04	22·53	28·01
·37	·01	·14	8·55	·80	3·75	·38	11·19	25·18	31·40
·19	·04	...	6·93	1·79	3·59	·45	8·08	21·09	31·60
·01	·09	·10	10·14	2·80	2·69	·54	13·91	30·28	30·40
·68	·05	...	9·94	1·88	3·20	·44	12·92	29·11	31·56
1·02	·10	·07	9·55	1·88	3·17	·49	10·82	37·10	25·88
·72	·06	·03	10·05	1·51	5·42	·37	9·06	27·22	27·28

1	2	3	4			
			Births.			
No.	Districts and Towns.	Population according to Census of 1931.	Male.	Female.	Total.	Birth-rate.
	B—TOWNS.					
1	City of Bombay	1,161,383	18,220	16,954	35,174	39·29
	East Khándesh District.					
2	Jalgaon	34,375	849	692	1,541	44·83
3	Nasírabad	14,753	261	207	468	31·72
4	Yawal	12,751	256	220	476	37·33
5	Dharangaon	18,542	324	265	589	31·76
6	Erandol	12,382	262	262	524	42·32
7	Amalner	23,491	360	261	621	26·44
8	Párola	12,277	338	284	622	50·66
9	Chálisgaon	16,808	332	303	635	37·78
10	Chopda	18,434	206	157	363	19·69
11	Bhusáwal	27,989	359	300	659	23·54
	West Khandesh District.					
12	Dhulia	39,939	746	624	1,370	34·30
13	Nandurbár	16,919	434	399	833	49·23
	Surat District.					
14	Surat	98,936	3,137	2,992	6,129	61·94
15	Rander	12,344	243	263	506	40·99
16	Bulsar	19,481	368	328	696	35·73
	Broach District.					
17	Broach	34,276	1,177	1,138	2,315	67·54
18	Jambusar	11,734	327	259	586	49·94
19	Ankleshwar	12,035	281	279	560	46·53
	Kaira District.					
20	Kaira	8,316	178	155	333	40·04
21	Mehmedabad	7,116	161	150	311	43·70
22	Nadiad	34,584	893	787	1,680	48·57
23	Borsad	13,191	420	341	761	57·69
24	Anand	11,660	315	277	592	50·77
25	Umreth	14,779	385	336	721	48·78
26	Dakore	8,493	150	162	312	36·73
27	Kapadvanj	16,556	374	412	786	47·47
	Panch Mahals District.					
28	Godhra	35,110	464	409	873	24·86
29	Dohad	22,093	396	308	704	31·86

No. VI—*contd.*

5	6	7	8	9	10	11	
						Injuries	
						Suicide.	
Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Male.	Female.
4	687	...	2,332	1,648	13,240	83	30
...	...	...	291	41	156	...	...
...	...	...	172	37	97	1	1
8	...	...	135	27	59	1	...
...	...	...	120	44	92	...	...
2	...	...	143	15	58	...	1
22	...	...	216	6	110	1	3
20	...	...	191	45	78	...	...
16	...	...	246	18	84	1	...
31	...	...	112	9	58	...	1
31	1	...	192	40	70	1	...
36	...	...	296	43	190	1	...
9	...	...	185	63	117	...	...
...	7	...	805	471	1,486	4	1
...	...	...	196	6	98	...	...
...	...	...	32	2	156	2	1
10	1	...	315	26	246	...	...
1	...	...	148	5	91	...	...
...	...	...	270	6	42	...	...
...	...	...	89	5	98	...	...
...	...	...	129	16	66	1	...
...	1	...	669	29	280	...	...
...	22	...	283	17	36	...	...
...	...	...	177	23	118	...	...
1	...	...	273	7	223	1	...
...	...	...	113	35	100	...	...
...	17	...	289	16	92	...	...
...	2	...	422	3	110	...	...
...	3	...	341	10	53	...	...

1	2	11 INJURIES—*contd.*				12	13
No.	Districts and Towns.	Wounding or Accident.	Snake-bite, or killed by wild beasts.	Rabies.	Total.	All other causes.	Total deaths from all causes.
	B—TOWNS.						
1	City of Bombay	646	2	17	778	11,725	30,575
	East Khandesh District.						
2	Jalgaon	8	1	...	9	348	845
3	Nasirabad	3	1	...	6	68	380
4	Yawal	3	...	...	4	75	308
5	Dharangaon	3	...	...	3	129	388
6	Erandol	...	1	1	3	87	308
7	Amalner	8	...	...	12	128	494
8	Parola	5	...	...	5	83	422
9	Chalisgaon	6	...	...	7	38	409
10	Chopda	1	1	...	3	55	268
11	Bhusawal	13	...	...	14	68	416
	West Khandesh District.						
12	Dhulia	12	...	...	13	341	919
13	Nandurbar	2	...	...	2	192	568
	Surat District.						
*14	Surat	67	2	...	74	2,004	4,847
15	Rander	...	1	...	1	44	345
16	Bulsar	3	...	...	6	219	415
	Broach District.						
17	Broach	2	...	1	21	701	1,320
18	Jambusar	4	...	...	4	88	237
19	Ankleshwar	5	...	...	5	40	363
	Kaira District.						
20	Kaira ...	8	1	...	9	82	283
21	Mehmedabad ...	2	...	...	3	51	265
22	Nadiad ...	18	1	...	19	329	1,327
23	Borsad ...	1	...	...	1	107	466
24	Anand ...	9	2	...	11	176	505
25	Umreth ...	5	...	1	7	109	620
26	Dakore ...	5	...	...	5	100	353
27	Kapadvanj ...	9	...	...	9	130	553
	Panch Mahals District.						
28	Godhra	...	...	...	...	100	637
29	Dohad ...	7	1	...	8	56	471

* The ratios entered in second line against Surat town are worked out on the revised census population of the town (151,202) as subsequently enumerated by the Municipality.

No. VI—*contd.*

14

Ratio of Deaths per 1,000 of Population.

Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Injuries.	All other causes.	From all causes.	
								For the year.	Mean of previous five years.
·00	·59	...	2·01	1·42	11·40	·67	10·24	26·33	23·38
...	...	...	8·47	1·19	4·54	·26	10·12	24·58	20·67
...	...	...	11·66	2·51	6·58	·40	4·61	25·76	27·09
·63	...	...	10·59	2·11	4·63	·31	5·88	24·15	14·29
...	...	...	6·47	2·37	4·96	·16	6·96	20·92	22·87
·16	...	...	11·55	1·21	4·68	·24	7·03	24·87	25·56
·94	...	...	9·19	·26	4·68	·51	5·45	21·03	16·27
1·63	...	...	15·56	3·66	6·35	·41	6·76	34·37	24·26
·95	...	...	14·63	1·07	5·00	·42	2·26	24·33	22·51
1·68	...	...	6·08	·49	3·15	·16	2·98	14·54	12·97
1·11	·03	...	6·86	1·43	2·50	·50	2·43	14·86	12·27
·90	...	...	7·41	1·08	4·75	·33	8·54	23·01	20·20
·53	...	...	10·93	3·74	6·92	·12	11·35	33·57	27·43
...	·07	...	8·14	4·76	15·02	·75	20·26	48·99	42·04
...	·04	...	5·33	3·12	9·83	·49	13·25	32·06	41·68
...	...	...	15·88	·49	7·94	·08	3·56	27·95	25·97
...	...	...	1·64	·10	8·01	·31	11·24	21·30	18·04
·29	·03	...	9·20	·75	7·18	·61	20·45	38·51	35·58
·08	...	...	12·62	·43	7·75	·34	7·50	28·72	26·60
...	...	...	22·43	·50	3·49	·42	3·32	30·16	29·24
...	...	...	10·70	·60	11·79	1·08	9·86	34·03	28·93
..	...	...	18·13	2·25	9·27	·42	7·17	37·24	35·27
...	·03	...	19·34	·84	8·10	·55	9·51	38·37	38·09
...	1·67	...	21·46	1·29	2·72	·08	8·11	35·33	39·49
...	...	...	15·18	1·97	10·13	·94	15·09	43·31	36·32
0·7	...	...	18·47	·47	15·09	·47	7·38	41·95	35·55
...	...	...	13·30	4·12	11·78	·59	11·77	41·56	38·82
...	1·03	...	17·45	·97	5·56	·54	7·85	33·40	29·65
...	·06	...	12·02	·09	3·13	...	2·84	18·14	16·38
...	·14	...	15·44	·45	2·40	·36	2·53	21·32	18·69

1	2	3	4			
			Births.			
No.	Districts and Towns.	Population according to Census of 1931.	Male.	Female.	Total.	Birth-rate.
	B—TOWNS—*contd.*					
	Ahmedabad District.					
30	Ahmedabad	310,000	9,009	8,526	17,535	56·56
31	Dhandhuka	9,076	209	188	397	43·74
32	Viramgaon	18,965	386	349	735	38·75
33	Dholka	13,743	391	367	758	55·15
34	Ahmedabad Cantonment	2,492	40	45	85	34·11
	Ahmednagar District.					
35	Ahmednagar	41,890	1,090	1,035	2,175	51·92
36	Sangamner	15,355	150	118	268	17·45
37	Ahmednagar Cantonment	11,141	124	112	236	21·18
	Poona District.					
38	Poona City	162,901	2,772	2,527	5,299	32·52
39	Poona Suburban	16,676	176	117	293	15·57
40	Junnár	8,421	58	40	98	11·63
41	Bárámati	14,170	246	235	481	33·94
42	Lonávla	10,694	153	145	298	27·85
43	Poona Cantonment	28,257	292	227	519	18·36
44	Kirkee do.	9,976	208	178	386	38·69
	Nasik District.					
45	Násik	48,703	621	523	1,144	23·49
46	Trimbak	4,334	78	79	157	36·23
47	Igatpuri	9,627	127	103	230	23·89
48	Manmád	12,263	120	101	221	18·02
49	Yeola	16,751	255	166	421	25·13
50	Málegaon	32,462	643	580	1,223	37·68
51	Deoláli Cantonment	6,114	46	43	89	14·56
	Thana District.					
52	Thána	21,816	285	307	592	27·13
53	Bassein	12,689	150	141	291	22·93
54	Bhiwandi	15,619	143	123	266	17·03
55	Kalyán	26,291	253	250	503	19·13
	Bombay Suburban District.					
56	Bándra	45,320	777	764	1,541	32·34

No. VI—*contd.*

5	6	7	8	9	10	11	
						Injuries.	
Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Suicide.	
						Male.	Female.
...	61	...	2,131	828	5,386	8	2
...	...	...	134	9	78	...	...
...	2	...	451	16	347	...	...
...	...	...	260	21	105	...	...
...	...	...	16	6	13	...	...
11	...	...	143	114	401	1	...
25	...	...	76	19	46	...	...
1	...	...	56	19	73	...	...
2	...	...	1,465	480	1,935	2	2
...	...	...	191	22	41	1	...
...	...	...	29	4	25	...	...
...	...	...	78	49	84	...	...
...	...	...	69	13	104	...	...
...	...	...	46	30	150	1	...
...	...	...	12	60	64	1	...
74	8	...	340	128	455	1	...
2	...	...	37	9	18	...	...
3	...	...	58	11	42	...	...
27	...	...	79	3	19	...	...
14	...	...	213	41	176	...	...
108	...	...	307	78	143	...	...
2	1	...	10	5	20	...	...
10	3	...	108	58	98	1	1
5	...	...	32	10	27	...	...
1	...	...	55	35	108	...	...
33	...	...	37	34	106	1	...
...	3	...	58	90	231	...	1

1	2	11 INJURIES—*contd.*				12	13
No.	Districts and Towns.	Wounding or Accident.	Snake-bite, or killed by wild beasts.	Rabies.	Total.	All other causes.	Total deaths from all causes.
	B—TOWNS—*contd.*						
	Ahmedabad District.						
30	Ahmedabad	139	5	15	169	5,833	14,408
31	Dhandhuka	4	...	...	4	41	266
32	Viramgaon	...	...	...	...	90	906
33	Dholka	4	1	1	6	117	509
34	Ahmedabad Cantonment	...	...	...	...	9	44
	Ahmednagar District.						
35	Ahmednagar	14	...	...	15	549	1,233
36	Sangamner	3	...	...	3	117	286
37	Ahmednagar Cantonment	2	...	...	2	59	210
	Poona District.						
38	Poona City	32	...	...	36	2,543	6,461
39	Poona Suburban	4	...	...	5	91	350
40	Junnar	4	...	...	4	54	116
41	Baramati	11	1	1	13	110	334
42	Lonavla	4	...	...	4	75	265
43	Poona Cantonment	7	...	...	8	237	471
44	Kirkee do.	2	...	...	3	139	278
	Nasik District.						
45	Nasik	24	...	...	25	815	1,845
46	Trimbak	2	...	...	2	29	97
47	Igatpuri	6	...	...	6	43	163
48	Manmad	1	...	...	1	40	169
49	Yeola	7	...	...	7	124	575
50	Malegaon	16	...	...	16	212	866
51	Deolali Cantonment	...	...	...	...	34	72
	Thana District.						
52	Thana	11	1	...	14	284	575
53	Bassein	...	1	...	1	91	166
54	Bhiwandi	2	1	...	3	105	307
55	Kalyan	10	1	...	12	158	380
	Bombay Suburban District.						
56	Bandra	10	...	...	11	498	891

No. VI—*contd.*

14

RATIO OF DEATHS PER 1,000 OF POPULATION.

Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Injuries.	All other causes.	From all causes	
								For the year.	Mean of previous five years.
...	·19	...	6·87	2·67	17·37	·55	18·82	46·47	47·62
...	...	...	14·76	·99	8·59	·44	4·52	29·30	28·62
...	·10	...	23·78	·84	18·30	...	4·75	47·77	48·46
...	...	...	18·92	1·53	7·64	·44	8·51	37·04	30·51
...	...	...	6·42	2·41	5·22	...	3·61	17·66	13·81
·26	...	...	3·40	2·72	9·57	·36	13·12	29·43	25·80
1 64	...	...	4·94	1·24	3·00	·19	7·62	18·63	18·96
·09	...	...	5·02	1·71	6·55	·18	5·30	18·85	20·46
·01	...	...	9·00	2·93	11·89	·22	15·61	39·66	33·13
...	...	...	11·45	1·32	2·46	·30	5·45	20·98	18·58
...	...	...	3·43	·47	2·96	·47	6·44	13·77	19·26
...	...	...	5·50	3·46	5·93	·91	7·77	23·57	27·99
...	...	...	6·45	1·22	9·73	·37	7·01	24·78	21·64
...	...	...	1·64	1·06	5·30	·28	8·38	16·66	13·67
...	...	...	1·20	6·01	6·41	·30	13·94	27·86	27·27
1·52	·14	...	7·00	2·11	9·34	·51	16·74	37·88	33·16
·46	...	...	8·54	2·31	4·15	·46	6·69	22·38	26·81
·31	...	...	6·03	1·76	4·36	·62	4·46	16·93	16·16
2·20	...	...	6·44	·32	1·55	·08	3·27	13·78	11·32
·84	...	...	12·59	2·79	10·49	·41	7·38	34·34	29·89
3·33	...	...	9·46	2·77	4·39	·49	6·60	26·68	27·02
·33	·16	...	1·64	6·22	3·27	...	5·56	11·78	10·63
·46	·14	...	4·96	2·66	4·48	·64	13·02	26·36	21·11
·39	...	...	2·69	·79	2·13	·08	7·16	13·08	11·46
·06	...	...	3·52	2·24	6·91	·19	6·73	19·65	18·25
1·26	...	...	1·39	1·29	4·04	·46	6·01	14·45	16·64
...	·06	...	1·22	1·90	4·84	·23	10·45	18·70	13·85

1	2	3	4			
			Births.			
No.	Districts and Towns.	Population according to Census of 1931.	Male.	Female.	Total.	Birth-rate.
	B—TOWNS—*contd.*					
	Bombay Suburban District—contd.					
57	Kurla	30,311	434	405	839	27·68
	Kolaba District.					
58	Alibág	6,653	140	122	262	39·38
59	Mahád	8,123	128	115	243	29·92
60	Panwel	8,423	167	133	300	35·62
61	Uran	9,762	57	49	106	10·86
	Ratnagiri District.					
62	Ratnágiri	23,906	229	182	411	17·18
63	Vengurla	20,158	403	370	773	38·34
64	Málwan	29,817	408	355	763	25·59
65	Chiplun	13,056	195	179	374	28·63
	Belgaum District.					
66	Belgaum	41,204	713	574	1,287	31·23
67	Gokak	11,866	252	231	483	40·70
68	Athni	13,561	248	197	445	32·81
69	Nipani	17,857	264	242	506	28·34
70	Belgaum Cantonment	8,220	30	32	62	7·54
	Dharwar District.					
71	Dharwar	41,671	767	690	1,457	34·48
72	Hubli	89,982	1,198	1,070	2,268	25·20
73	Gadag-Bettigeri	45,852	1,137	976	2,113	46·08
74	Ranebennur	16,967	350	327	677	39·90
75	Nawalgund	6,203	127	120	247	39·81
	Bijapur District.					
76	Bijapur	39,747	804	712	1,516	38·16
77	Bagalkot	15,597	427	447	874	56·04
78	Guledgud	16,756	345	293	638	38·08
79	Ilkal	14,267	217	161	378	26·49

No. VI—*contd.*

5	6	7	8	9	10	11	
						Injuries.	
Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Suicide.	
						Male.	Female.
...	...	...	69	104	203	...	...
...	1	...	18	5	18	...	...
1	...	...	32	...	17	...	1
...	3	...	107	8	35	...	1
...	13	...	9	6	25	...	...
...	2	...	99	6	60	...	...
...	...	1	63	17	108	...	...
...	3	...	92	16	92	...	...
...	5	...	109	8	34	...	...
...	...	4	147	40	190	...	...
...	...	...	86	29	68	1	...
...	...	...	87	8	65	...	...
...	...	...	60	9	81	1	1
...	...	...	17	1	7	...	...
2	...	38	194	32	155	2	2
6	...	...	399	60	424	1	...
1	1	1	300	44	193	6	2
...	...	...	108	48	78	...	2
...	...	...	11	6	12	2	1
2	1	...	132	29	120	...	...
2	...	...	129	10	84	...	...
...	...	...	43	6	81	...	...
34	...	...	90	5	61	...	...

1	2	11				12	13
		INJURIES—*contd.*					
No.	Districts and Towns.	Wounding or accident.	Snake-bite, or killed by wild beasts.	Rabies.	Total.	All other causes.	Total deaths from all causes.
	B—TOWNS—*contd.*						
	Bombay Suburban District—contd.						
57	Kurla	4	...	...	4	315	695
	Kolaba District						
58	Alibag	5	...	...	5	51	98
59	Mahad	2	...	...	3	51	104
60	Panwel	3	...	1	5	36	194
61	Uran	2	...	...	2	26	81
	Ratnagiri District.						
62	Ratnagiri	1	1	...	2	146	315
63	Vengurla	6	...	...	6	265	460
64	Malwan	6	...	...	6	337	546
65	Chiplun	2	1	...	3	102	261
	Belgaum District.						
66	Belgaum	15	...	3	18	578	977
67	Gokak	6	...	...	7	75	265
68	Athni	8	2	...	10	54	224
69	Nipani	6	1	2	11	112	273
70	Belgaum Cantonment	...	...	...	...	33	58
	Dharwar District.						
71	Dharwar	12	1	...	17	420	858
72	Hubli	8	1	1	11	457	1,357
73	Gadag-Bettigeri	17	...	...	25	743	1,308
74	Ranebennur	1	...	...	3	186	423
75	Nawalgund	...	...	...	3	79	111
	Bijapur District.						
76	Bijapur	15	...	...	15	475	774
77	Bagalkot	9	...	...	9	216	450
78	Guledgud	5	...	...	5	199	334
79	Ilkal	1	1	1	3	241	434

No. VI—*contd.*

14

RATIO OF DEATHS PER 1,000 OF POPULATION.

Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Injuries.	All other causes.	From all causes. For the year.	From all causes. Mean of previous five years.
...	...	...	2·77	3·43	6·70	·13	10·59	22·92	18·80
...	·15	...	2·71	·75	2·70	·75	7·67	14·73	15·59
·12	...	...	4·03	...	2 10	·37	6·28	12·80	15·31
...	·36	...	12·71	·94	4·16	·59	4·47	23·03	19·92
...	1·33	...	·92	·62	2·57	·20	2·66	8·30	8·42
...	·09	...	4·19	·26	2·44	·09	6·11	13·18	11·27
...	...	·05	3·18	·81	5·35	·29	13·13	22·81	26·60
...	·10	...	3·08	·54	3·09	·20	11·30	18·31	16·16
...	·38	...	8·35	·61	2·61	·23	7·81	19·99	18·05
...	...	·10	3·57	·97	4·68	·44	14·03	23·71	26·45
...	...	...	7·25	2·44	5·73	·59	6·32	22·33	25·54
...	...	...	6·42	·59	4·79	·74	3·98	16·52	22·05
...	...	...	3·36	·50	4·54	·62	6·27	15·29	14·62
...	...	...	2·07	·12	·85	...	4·01	7·06	9·73
·05	...	·91	4·65	·77	3·72	·46	10·07	20·58	28·71
·07	...	...	4·48	·67	4·71	·12	5·08	15·08	16·23
·02	·02	·02	6·54	·95	4·21	·55	16·20	28·52	34·55
...	...	...	6·33	2·83	4·60	·18	10·96	24·93	27·64
...	...	...	1·77	·97	1·93	·48	12·74	17·89	28·02
·05	·02	...	3·32	·73	3·02	·38	11·95	19·47	23·15
·13	...	...	8·27	·64	5·38	·58	13·85	28·85	31·00
...	...	...	2·57	·36	4·83	·30	11·88	19·93	30·50
2·38	...	...	6·31	.35	4·28	·24	16·89	30·42	39·46

1	2	3	4			
			Births.			
No.	Districts and Towns.	Population according to Census of 1931.	Male.	Female.	Total.	Birth rate.
	B—TOWNS—*contd.*					
	Kanara District.					
80	Karwar	16,122	197	184	381	23·63
81	Kumta	14,554	170	169	339	23·29
82	Gokarn	8,506	132	136	268	31·51
83	Honawar	7,955	127	102	229	28·79
84	Bhatkal	8,938	152	154	306	35·87
	Sholapur District.					
85	Sholapur	144,654	3,624	3,356	6,980	48·25
86	Barsi	27,610	632	617	1,249	45·24
87	Pandharpur	29,460	556	557	1,113	37·78
	Satara District.					
88	Satara	26,379	317	274	591	22·40
89	Wai	11,760	251	185	436	37·08
90	Karad	14,479	161	142	303	20·93
91	Ashta	11,251	208	144	352	31·29
92	Islampur	10,737	90	113	203	18·91
	Total for the towns ...	3,558,857	66,675	61,078	127,753	35·90
	Total for the Province ...	17,932,368	376,426	353,050	729,476	40·68

No. VI—*contd.*

5	6	7	8	9	10	11 Injuries.	
Cholera.	Small-pox.	Plague.	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Suicide.	
						Male.	Female.
...	...	6	15	4	13	...	...
...	...	1	39	34	27	...	1
...	...	...	47	25	25	1	...
...	...	...	42	10	6	...	...
...	1	...	44	34	27	...	...
24	10	1	469	468	2,368	4	2
12	...	...	351	34	93	4	1
6	1	...	169	229	496	2	1
4	1	...	190	40	120	1	...
...	...	...	40	27	39	...	...
52	...	...	56	7	33	...	1
4	...	...	53	15	30	...	...
1	...	...	32	10	27	1	1
660	861	52	19,621	6,339	33,514	140	61
10,992	1,810	506	164,130	28,094	111,497	402	269

1	2	11				12	13
		INJURIES—*contd.*					
No.	Districts and Towns.	Wounding or accident.	Snake-bite, or killed by wild beasts.	Rabies.	Total.	All other causes.	Total deaths from all causes.
	B—TOWNS—*contd.*						
	Kanara District.						
80	Karwar	1	...	...	1	103	142
81	Kumta	4	...	...	5	62	168
82	Gokarn	2	...	...	3	83	183
83	Honawar	3	...	...	3	23	84
84	Bhatkal	6	3	...	9	70	185
	Sholapur District.						
85	Sholapur	35	3	1	45	1,526	4,911
86	Barsi	21	2	...	28	528	1,046
87	Pandharpur	27	2	...	32	485	1,418
	Satara District.						
88	Satara	9	2	...	12	370	737
89	Wai	2	...	...	2	116	224
90	Karad	...	1	...	2	106	256
91	Ashta	7	...	...	7	121	230
92	Islampur	8	...	1	11	111	192
	Total for the towns ...	1,451	46	47	1,745	39,234	102,026
	Total for the Province ...	5,154	1,078	162	7,065	1,69,124	4,93,208

No. VI—*contd.*

14

Ratio of Deaths per 1,000 of Population.

Cholera.	Small-pox.	Plague	Fevers.	Dysentery and Diarrhœa.	Respiratory Diseases.	Injuries.	All other causes.	From all causes.	
								For the year.	Mean of previous five years.
.....	...	·37	·92	·25	·81	·06	6·39	28·46	12·03
.....	...	·07	2·68	2·34	1·85	·34	4·26	11·54	14·43
.....	...	...	5·53	2·94	2·94	·35	9·76	21·51	22·22
.....	...	...	5·28	1·26	·75	·38	2·89	10·56	9·81
.....	·11	...	4·92	3·80	3·02	1·01	7·83	20·70	17·68
·17	·07	·01	3·24	3·23	16·37	·31	10·55	33·95	35·28
·43	...	..	12·71	1·23	3·37	1·01	19·12	37·88	39·78
·20	·03	...	5·74	7·77	16·84	1·09	16·46	48·13	49·56
·15	·04	...	7·20	1·52	4·55	·45	14·03	27·94	25·47
.....	...	...	3·40	2·30	3·31	·17	9·87	19·05	11·31
3·59	...	...	3·87	·48	2·28	·14	7·32	17·68	15·33
·36	...	...	4·71	1·33	2·67	·62	10·76	20·44	20·44
·09	...	...	2·98	·93	2·51	1·02	10·38	17·88	19·65
·19	·24	·02	5·51	1·78	9·41	·49	11·03	28·67	27·12
·61	·11	·03	9·15	1·56	6·22	·39	9·43	27·50	27·25

ANNUAL FORM No. VI (*a*)—DEATHS *registered from certain* *during the*

1	2	3		4		5	
		Enteric Fever.		Measles.		Cerebro-spinal Fever.	
No.	Districts and Towns	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	A—DISTRICTS (EXCLUDING TOWNS).						
	Northern Registration District.						
1	East Khándesh	311	·31	912	·90	...	...
2	West Khándesh	800	1·18	35	·05	...	...
3	Surat	42	·08	1	·00	...	...
4	Broach	...	...	10	·04	...	...
5	Kaira	...	...	31	·05	1	·00
6	Panch Maháls	4	·01	21	·05	...	...
7	Ahmedabad	2	·00	29	·05	...	...
	Central Registration District.						
8	Ahmednagar	274	·30	88	·10	...	...
9	Poona	251	·28	123	·14	1	·00
10	Násik	373	·43	81	·09	...	...
11	Thána	484	·63	13	·02	...	...
12	Bombay Suburban	25	·25	26	·26	...	...
13	Kolaba	645	1·08	66	·11	...	...
14	Ratnágiri	116	·09	91	·03	...	...
	Southern Registration District.						
15	Belgaum	292	·30	112	·11	...	...
16	Dhárwár	567	·62	121	·13	...	...
17	Bijápur	207	·26	50	·06	...	...
18	Kánara	384	1·06	8	·02	...	...
19	Sholápur	67	·10	277	·41	...	...
20	Sátára	70	·06	243	·22	...	...
	Total of Districts ...	4,914	·34	2,338	·16	2	·00

Note.—The returns under the following columns and diseases are blank :—
(8) Kala Azar Fever, (10) Typhus, (11) Black Water Fever, (19) Beri Beri, (22) Acute Poliomyelities, (23) Mumps, (24) T. B, of joints, (25) Other tubercular diseases.

diseases in the DISTRICTS *and* TOWNS *of the* BOMBAY PROVINCE *year 1937.*

6 Malaria.		7 Influenza.		9 Relapsing Fever.		12 Other Fevers.		13 Dysentery.		14 Diarrhœa.	
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
1,497	1·48	1	·00	...	...	15,353	15·13	162	·16	1,298	1·28
2,478	3·64	...	...	...	...	5,608	8·24	140	·21	676	·99
49	·09	...	...	...	...	5,535	9·83	41	·07	159	·28
3	·01	...	...	...	...	4,604	16·67	21	·08	208	·75
...	...	...	...	...	...	5,627	8·98	403	·64	309	·49
16	·04	...	...	...	...	6,807	17·13	29	·07	279	·70
348	·54	...	...	...	...	13,587	21·09	120	·19	267	·41
1,702	1·86	...	...	...	...	2,847	3·11	154	·17	2,149	2·35
3,350	3·70	...	...	...	...	5,517	6·09	26	·03	2,421	2·68
5,875	6·77	21	·02	...	...	2,552	2·94	72	·08	1,218	1·43
1,966	2·59	3	·01	...	...	2,950	3·88	162	·21	821	1·08
152	1·50	5	·05	...	...	311	3·07	130	1·30	154	1·52
649	1·09	8	·01	...	...	3,416	5·73	487	·87	596	1·01
49	·05	...	...	...	...	6,748	5·56	89	·08	623	·52
1,446	1·47	10	·01	...	...	4,079	4·16	84	·09	1,968	2·01
1,716	1·90	1	·00	...	...	5,315	5·88	52	·06	670	·74
566	·75	2	·00	...	...	4,600	5·88	60	·08	1,345	1·72
847	2·34	1	·00	...	...	2,430	6·72	222	·61	791	2·19
401	·59	...	...	...	...	5,972	8·84	18	·03	1,250	1·84
340	·31	9	·01	...	...	9,896	8·95	14	·01	2,067	1·87
23,450	1·63	61	·00	...	...	113,744	7·91	2,486	·17	19,269	1·34

1	2	15		16		17		18	
		Pneumonia.		Phthisis.		Whooping cough.		Other Respiratory diseases.	
No.	Districts and Towns.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	A.—DISTRICTS (EXCLUDING TOWNS)—*contd.*								
	Northern Registration District.								
1	East Khandesh	141	·14	959	·95	12	·01	5,036	4·96
2	West Khandesh	46	·07	582	·86	12	·02	4,461	6·56
3	Surat	1,539	2·73	485	·86	...	...	3,213	5·71
4	Broach	348	1·26	204	·74	...	...	1,396	5·06
5	Kaira	490	·78	1,437	2·29	45	·07	5,753	9·18
6	Panch Mahâls	127	·32	283	·71	4	·01	1,438	3·62
7	Ahmedabad	467	·72	854	1·33	...	...	2,269	3·52
	Central Registration District.								
8	Ahmednagar	167	·17	1,364	1·49	...	...	4,214	4·60
9	Poona	124	·14	921	1·02	...	...	3,746	4·14
10	Nasik	638	·73	725	·84	...	...	4,212	4·85
11	Thana	1,156	1·52	1,289	1·70	...	...	2,326	3·06
12	Bombay Suburban	117	1·16	129	1·27	...	...	204	2·02
13	Kolaba	330	·56	1,931	3·24	...	...	1,150	1·93
14	Ratnágiri	60	·04	2,659	2·18	...	...	2,536	2·09
	Southern Registration District.								
15	Belgaum	133	·14	774	·79	...	...	2,632	2·68
16	Dhárwár	75	·08	653	·72	...	...	2,653	2·94
17	Bijápur	11	·01	611	·78	...	...	2,192	2·80
18	Kánara	40	·11	198	·55	...	...	736	2·03
19	Sholapur	77	·11	536	·79	...	...	1,549	2·29
20	Satara	91	·08	1,203	1·09	...	...	2,210	2·00
	Total of Districts ...	6,177	·43	17,797	1·24	73	·00	53,926	3·75

No. VI (*a*)—*contd.*

20 Diphtheria.		21 Chicken-pox.		26 Leprosy.		27 Cancer.		28	29 Deaths under 1 year.			30	31
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths from child birth.	Male.	Female.	Total.	Infant mortality rate per 1,000 births.	No.
...	...	1	·00	101	·10	...	...	86	4,851	4,038	8,889	176·96	1
...	...	2	·00	27	·03	...	...	31	2,969	2,604	5,573	156·49	2
..	...	...	...	28	·05	38	·07	35	1,902	1,726	3,628	147·35	3
...	...	...	...	...	...	2	·01	44	1,401	1,235	2,636	188·15	4
..	...	3	·00	4	·01	2	·00	50	2,654	2,485	5,139	181·11	5
.	...	2	·00	13	·03	1	·00	102	1,251	1,097	2,348	142·90	6
.	...	...	...	...	...	...	...	40	2,818	2,607	5,425	185·23	7
21	·02	...	...	...	...	...	...	243	3,203	2,638	5,841	161·21	8
40	·04	...	...	...	...	...	...	115	2,996	2,425	5,421	164·22	9
1	·00	...	...	...	...	...	...	166	3,206	2,695	5,901	144·83	10
10	·01	...	...	...	...	...	...	112	1,458	1,198	2,656	115·47	11
...	...	...	...	...	...	...	...	30	199	161	360	159·79	12
3	·01	...	...	...	...	...	...	112	1,594	1,268	2,862	123·92	13
...	...	...	...	...	...	...	...	115	2,996	2,425	5,421	164·22	14
...	...	...	...	...	...	...	...	173	2,887	2,393	5,280	122·39	15
...	...	...	...	...	...	...	...	249	2,732	2,202	4,934	133·28	16
...	..	...	...	...	...	...	...	165	2,181	1,786	3,967	116·43	17
...	...	...	...	...	...	...	...	260	1,296	1,127	2,423	191·36	18
...	...	...	...	...	...	...	...	85	2,821	2,345	5,166	181·31	19
...	...	...	...	...	...	...	...	176	3,917	3,296	7,213	153·45	20
75	·00	8	...	173	·01	43	·00	2,400	48,468	41,051	89,519	148·77	

1	2	3		4		5	
		Enteric Fever.		Measles.		Cerebro-spinal Fever.	
No.	Districts and Towns.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	B—TOWNS.						
1	City of Bombay	341	·30	211	·18	154	·13
	East Khandesh District.						
2	Jalgaon	23	·67	49	1·43	1	·03
3	Nasirabad	3	·20	16	1·09	...	...
4	Yawal	14	1·10	19	1·49	...	...
5	Dharangaon	1	·05	5	·27	...	...
6	Erandol	...	...	...	...	...	...
7	Amálner	5	·21	3	·13	...	...
8	Parola	4	·33	47	3·83	...	..
9	Chálisgaon	8	·47	12	·71	...	...
10	Chopda	2	·11	5	·27	...	...
11	Bhusáwal	1	·04	36	1·28	1	·04
	West Khandesh District.						
12	Dhulia	12	·30	8	·20	...	...
13	Nandurbar	18	1·06	1	·06	...	...
	Surat District.						
*14	Surat	93	·94 ·62	42	·42 ·28	...	...
15	Rander	1	·08	...	...	...	...
16	Bulsar	6	·31	5	·26	...	...
	Broach District.						
17	Broach	2	·06	2	·06	2	·06
18	Jambusar	...	...	1	·09	1	·09
19	Ankleshwar	...	...	1	·08	...	...
	Kaira District.						
20	Kaira	...	...	...	...	...	...
21	Mehmedabad	...	...	...	...	...	...
22	Nadiád	...	...	24	·69	...	...
23	Borsad	...	...	7	·53	...	...
24	Anand	1	·09	6	·51	...	...
25	Umreth	...	...	1	·07	...	...
26	Dákore	1	·12	16	1·88	...	...
27	Kapadvanj	...	...	5	·30	...	...

*The ratios entered in second line against Surat town are worked out on the revised census population of the town (151,202) as subsequently enumerated by the Municipality.

No. VI (*a*)—*contd.*

6 Malaria.		7 Influenza.		9 Relapsing Fever.		12 Other Fevers.		13 Dysentery.		14 Diarrhœa.	
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
72	·06	65	·06	...	...	1,489	1·28	539	·46	1,109	·96
10	·29	...	...	...	...	208	6·05	2	·06	39	1·13
1	·07	...	...	...	...	152	10·30	...	...	37	2·51
9	·71	1	·08	...	...	92	7·21	...	...	27	2·11
14	·73	...	...	...	...	100	5·39	4	·21	40	2·16
..	...	...	...	...	...	143	11·55	...	...	15	1·21
..	...	...	...	...	...	208	8·85	3	·13	3	·13
...	...	...	...	...	...	140	11·40	1	·08	44	3·58
3	·18	...	...	...	...	223	13·27	1	·06	17	1·01
.	...	...	...	...	...	105	5·70	3	·16	6	·33
6	·21	...	...	...	...	148	5·29	40	1·43	...	...
30	·75	...	...	...	...	246	6·11	4	·10	39	·98
25	1·48	...	...	...	...	141	8·33	9	·53	54	3·19
212	2·14 1·40	...	...	1	·01 0·0	457	4·62 3·00	133	1·34 ·88	338	3·42 2·24
...	...	...	...	...	...	195	15·80	6	·49	...	...
3	·15	...	...	...	...	18	·92	1	·05	1	·05
1	·03	...	...	...	...	308	8·99	6	·17	20	·58
...	...	...	...	...	...	146	12·44	1	·09	4	·34
...	...	...	...	...	...	269	22·35	5	·42	1	·08
...	...	...	...	...	...	89	10·70	...	...	5	·60
...	...	...	...	...	...	129	18·13	2	·28	14	1·97
...	...	...	...	...	...	645	18·65	16	·46	13	·38
1	·08	...	...	...	...	275	20·85	14	1·06	3	·23
2	·17	...	...	...	...	168	14·41	5	·43	18	1·54
...	...	...	...	...	...	272	18·40	4	·27	3	·20
14	1·65	...	...	...	...	82	9·65	8	·94	27	3·18
...	...	1	·06	...	...	283	17·09	4	·24	12	·73

ANNUAL FORM

1	2	15		16		17		18	
No.	Districts and Towns.	Pneumonia.		Phthisis.		Whooping Cough.		Other Respiratory diseases.	
		Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	B—TOWNS.								
1	City of Bombay ...	9,154	7·88	2,025	1·74	...	...	2,061	1·77
	East Khandesh District.								
2	Jalgaon	33	·96	43	1·25	...	...	80	2·33
3	Nasirabad	...	...	4	·27	...	...	93	6·31
4	Yawal	18	1·41	8	·63	...	...	33	2·59
5	Dharangaon	3	·16	68	3·67	...	...	21	1·13
6	Erandol	2	·16	4	·32	...	...	52	4·20
7	Amálner	6	·25	12	·51	...	...	92	3·92
8	Parola	4	·33	9	·73	...	...	65	5·29
9	Chálisgaon	6	·36	78	4·64	...	...	...	...
10	Chopda	1	·06	8	·43	...	...	49	2·66
11	Bhusáwal	25	·89	26	·93	...	...	19	·68
	West Khandesh District.								
12	Dhulia	26	·65	66	1·65	2	·05	96	2·40
13	Nandurbar	20	1·18	23	1·36	1	·06	73	4·32
	Surat District.								
14	Surat	726	7·34 4·80	317	3·20 2·10	...	...	443	4·48 2·93
15	Ránder	12	·97	59	4·78	...	...	27	2·19
16	Bulsar	114	5·85	14	·72	...	...	28	1·44
	Broach District.								
17	Broach	20	·58	52	1·52	...	...	174	5·08
18	Jambusar	2	·17	12	1·02	...	...	77	6·56
19	Ankleshwar ...	3	·25	8	·66	...	...	31	2·58
	Kaira District.								
20	Kaira	6	·72	23	2·77	...	...	69	8·30
21	Mehmedabad ...	...	...	6	·84	...	...	60	8·43
22	Nadiád	154	4·46	64	1·85	...	...	62	1·79
23	Borsad	4	·30	6	·45	...	...	26	1·97
24	Anand	43	3·69	43	3·69	...	...	32	2·75
25	Umreth	13	·88	15	1·02	...	...	195	13·19
26	Dakore	31	3·65	11	1·30	...	...	58	6·83
27	Kapadvanj	10	·61	26	1·57	...	...	56	3·38

* The ratios entered in second line against Surat town are worked out on the revised census population of the town (151,202) as subsequently enumerated by the Municipality.

No. VI (*a*)—*contd.*

20 Diphtheria.		21 Chicken pox.		26 Leprosy.		27 Cancer.		28	29 Deaths under 1 year.			30	31
Deaths.	Ratio.	Deaths	Ratio	Deaths	Ratio	Deaths	Ratio	Deaths from child birth.	Male.	Female.	Total.	Infant mortality rate per 1,000 births.	No.
...	...	...	..	...	...	...	...	162	4,635	4,027	8,662	246·26	1
...	...	...	...	...	...	...	...	22	132	89	221	143·41	2
...	...	...	...	2	·14	...	...	2	47	33	80	170·94	3
...	...	...	...	...	...	...	...	...	25	24	49	102·94	4
...	...	...	...	2	·11	...	...	2	48	45	93	157·89	5
...	...	...	...	...	...	...	...	10	40	35	75	143·13	6
...	...	...	...	3	·13	...	...	2	55	31	86	138·48	7
...	...	...	...	1	·03	...	...	1	45	54	99	159·16	8
...	...	...	...	1	·06	...	...	...	57	59	116	182·67	9
...	...	...	...	...	...	...	...	...	26	8	34	93·66	10
...	...	...	...	...	...	...	...	10	38	36	74	112·29	11
...	...	...	...	...	...	2	·05	4	96	90	186	135·76	12
...	...	...	...	...	...	...	...	1	93	72	165	198·07	13
...	...	...	...	5	·05 ·03	24	·24 ·16	37	855	813	1,668	272·14	14
...	...	...	...	...	...	...	...	...	50	39	89	175·89	15
...	...	...	...	...	...	...	...	3	54	45	99	142·24	16
...	...	...	...	...	...	...	...	35	205	155	360	155·51	17
...	...	...	...	...	...	2	·17	...	44	42	86	146·76	18
...	...	...	...	...	...	...	...	...	50	48	98	175·00	19
...	...	...	...	...	...	...	...	...	32	39	71	213·21	20
...	...	...	...	...	...	...	...	...	45	39	84	270·10	21
...	...	...	...	...	...	...	...	16	255	260	515	306·55	22
...	...	...	...	...	...	...	...	4	82	78	160	210·25	23
...	...	...	...	...	...	...	...	1	53	49	102	172·30	24
...	...	...	...	...	...	...	...	...	100	101	201	278·77	25
...	...	...	...	...	...	...	...	6	46	53	99	317·31	26
...	...	...	...	...	...	...	...	9	67	82	149	189·57	27

No	Districts and Towns.	3 Enteric Fever.		4 Measles.		5 Cerebro-spinal Fever.	
		Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	B—TOWNS—*contd.*						
	Panch Mahals District.						
28	Godhra	...	...	...	...	...	...
29	Dohad	11	·50	18	·82	...	...
	Ahmedabad District.						
30	Ahmedabad	57	·18	29	·09	57	·18
31	Dhandhuka	...	...	2	·22	...	...
32	Viramgam	...	...	...	...	...	...
33	Dholka	...	...	14	1·02	...	...
3	Ahmedabad Cantonment	...	...	...	...	...	...
	Ahmednagar District.						
35	Ahmednagar	14	·33	19	·45	...	...
36	Sangamner	7	·46	...	...	...	...
37	Ahmednagar Cantonment	2	·18	...	...	...	...
	Poona District.						
38	Poona City	113	·69	189	1·16	1	·02
39	Poona Suburban	1	·05	3	·18	...	...
40	Junnar	1	·13	...	...	...	...
41	Baramati	2	·14	4	·28	...	...
42	Lonávla	...	...	2	·18	...	...
43	Poona Cantonment	7	·25	...	...	...	...
44	Kirkee do.	3	·30	...	...	...	...
	Nasik District.						
45	Násik	45	·93	49	1·02	1	·02
46	Trimbak	...	...	...	...	1	·23
47	Igatpuri	2	·21	5	·52	...	...
48	Manmad	1	·01	...	...	...	...
49	Yeola	5	·29	1	·05	...	...
50	Málegaon	9	·28	5	·15	...	...
51	Deolali Cantonment	...	...	...	...	...	...
	Thana District.						
52	Thana	17	·78	6	·28	...	...
53	Bassein	8	·63	...	...	...	...

No. VI (*a*)—*contd.*

6 Malaria.		7 Influenza.		9 Relapsing Fever.		12 Other Fevers.		13 Dysentery.		14 Diarrhœa.	
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
...	...	...	...	...	...	422	11·99	...	...	3	·09
2	·09	4	·18	...	...	306	13·85	6	·27	4	·18
185	·60	2	·01	...	...	1,801	5·81	387	1·25	441	1·42
...	...	...	...	...	...	132	14·54	...	...	9	·99
...	...	...	...	...	...	451	23·78	6	·31	10	·53
14	1·02	...	...	...	...	232	16·88	4	·29	17	1·24
...	...	...	...	...	...	16	6·42	3	1·21	3	1·21
31	·74	1	·02	...	...	78	1·86	17	·41	97	2·31
22	1·43	...	...	...	...	47	3·05	1	·07	18	1·17
28	2·51	...	...	...	...	26	2·33	...	...	...	...
592	3·64	4	·03	...	...	566	3·48	65	·39	415	2·54
13	·78	...	...	...	...	174	10·44	10	·60	12	·72
2	·23	...	...	...	...	26	3·08	...	...	4	·47
8	·56	...	...	...	...	64	4·52	...	...	49	3·46
14	1·31	...	...	...	...	53	4·96	...	...	13	1·22
3	·11	1	·04	...	...	35	1·24	15	·53	15	·53
5	·50	...	...	...	...	4	·40	12	1·20	48	4·81
116	2·38	...	...	...	...	129	2·65	50	1·03	78	1·60
15	3·46	...	...	...	...	21	4·85	1	·23	8	1·85
21	2·18	...	...	...	...	30	3·12	...	...	11	1·14
1	·08	...	...	...	...	77	6·28	...	...	3	·24
12	·72	...	...	...	...	195	11·63	1	·05	40	2·38
77	2·37	...	...	...	...	216	6·66	4	·13	74	2·28
...	...	...	...	...	...	10	1·64	1	·16	4	·66
5	·23	...	...	...	...	80	3·67	34	1·56	24	1·10
5	·56	...	...	...	...	19	1·50	8	·63	2	·16

1	2	15		16		17		18	
		Pneumonia.		Phthisis.		Whooping Cough.		Other Respiratory diseases.	
No.	Districts and Towns.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	B—TOWNS—*contd.*								
	Panch Mahals District.								
28	Godhra ...	3	·09	10	·28	...	...	97	2·76
29	Dohad ...	23	1·04	24	1·09	...	...	6	·27
	Ahmedabad District.								
30	Ahmedabad ...	604	1·95	1,198	3·86	66	·21	3,518	11·35
31	Dhandhuka ...	3	·33	14	1·54	...	...	61	6·72
32	Viramgam ...	52	2·74	48	2·53	...	...	247	13·03
33	Dholka ...	14	1·02	17	1·24	...	...	74	5·38
34	Ahmedabad Cantonment...	9	3·61	4	1·61	...	...	...	...
	Ahmednagar District.								
35	Ahmednagar ...	243	5·80	68	1·62	...	...	90	2·15
36	Sangamner ...	3	·20	21	1·37	...	...	22	1·43
37	Ahmednagar Cantonment.	18	1·62	17	1·52	...	...	38	3·41
	Poona District.								
38	Poona City ...	1,061	6·51	580	3·57	...	...	294	1·81
39	Poona Suburban ...	15	·90	8	·48	...	...	18	1·08
40	Junnar ...	6	·71	16	1·90	...	...	3	·35
41	Baramati ...	33	2·33	25	1·77	...	...	26	1·83
42	Lonávla ...	27	2·53	23	2·15	...	...	54	5·05
43	Poona Cantonment ...	65	2·30	49	1·73	...	...	36	1·27
44	Kirkee do. ...	29	2·91	18	1·80	...	...	17	1·70
	Nasik District.								
45	Násik ...	185	3·80	133	2·73	...	...	137	2·81
46	Trimbak ...	4	·92	3	·69	...	...	11	2·54
47	Igatpuri ...	23	2·39	8	·83	...	...	11	1·14
48	Manmad ...	3	·24	5	·41	...	...	11	·90
49	Yeola ...	13	·77	48	2·86	...	...	115	6·86
50	Málegaon ...	20	·62	56	1·73	...	...	67	2·04
51	Deolali Cantonment ...	3	·49	6	·98	...	...	11	1·80
	Thana District.								
52	Thána ...	37	1·69	35	1·60	...	...	26	1·19
53	Bassein ...	9	·71	15	1·18	...	...	3	·24

No. VI (*a*)—*contd.*

20 Diphtheria.		21 Chicken pox.		26 Leprosy.		27 Cancer.		28	29 Deaths under 1 year.			30	31
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths from child birth.	Male.	Female.	Total.	Infant mortality rate per 1,000 births.	No.
...	...	...	...	...	...	...	...	4	107	87	194	222·22	28
...	...	...	...	...	...	...	...	2	67	48	115	163·35	29
...	...	2	·01	1	·00	47	·15	78	2,536	2,377	4,913	280·18	30
...	...	...	...	...	...	...	...	..	43	22	65	163·73	31
...	...	...	...	...	...	...	...	22	144	121	265	360·54	32
...	...	...	...	...	...	...	...	...	73	73	146	192·61	33
...	...	...	...	...	...	...	...	...	9	6	15	176·47	34
1	·02	...	...	...	...	...	...	13	200	151	351	161·37	35
...	...	...	...	...	...	...	...	12	21	25	46	171·64	36
...	...	...	...	...	...	...	...	2	22	15	37	126·78	37
3	·02	...	...	...	...	...	...	31	979	846	1,825	344·40	38
...	...	...	...	...	...	...	...	1	45	44	89	303·75	39
...	...	...	...	...	...	...	...	...	4	3	7	71·43	40
...	...	...	...	...	...	...	...	1	51	38	89	185·03	41
...	...	...	...	...	...	...	...	2	43	20	63	211·41	42
...	...	...	...	...	...	...	...	...	27	25	52	100·19	43
...	...	...	...	...	...	...	...	1	44	43	87	225·39	44
...	...	...	...	...	...	...	...	3	164	129	293	256·12	45
...	...	...	...	...	...	...	...	1	15	7	22	140·13	46
...	...	...	...	...	...	...	...	3	12	11	23	100·00	47
...	...	...	...	...	...	...	...	...	15	11	26	117·65	48
...	...	...	...	...	...	...	...	7	63	46	109	258·91	49
...	...	...	...	...	...	...	...	7	103	110	213	174·16	50
...	...	...	...	...	...	...	...	...	8	8	16	179·71	51
...	...	...	...	...	...	...	...	...	55	43	98	165·54	52
...	...	...	...	...	...	...	...	1	19	14	33	113·40	53

1	2	3		4		5	
No.	Districts and Towns.	Enteric Fever.		Measles.		Cerebro-spinal Fever.	
		Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	B—TOWNS—*contd.*						
	Thana District—contd.						
54	Bhiwandi	8	·51	...	...	...	...
55	Kalyán	7	·27	8	·30	...	...
	Bombay Suburban District.						
56	Bandra	15	·32	3	·06	1	·02
57	Kurla	...	...	14	·03	1	·03
	Kolaba District.						
58	Alibág	3	·45	3	·45	...	...
59	Mahád	5	·61	1	·12	...	...
60	Panvel	2	·24	...	...	...	...
61	Uran	7	·72	1	·10	...	...
	Ratnagiri District.						
62	Ratnágiri	6	·27	1	·05	...	...
63	Vengurla	6	·29	1	·05	1	·05
64	Málwan	...	...	3	·10	...	...
65	Chiplun	3	·23	7	·54	...	...
	Belgaum District.						
66	Belgaum	30	·73	4	·10	2	·05
67	Gokák	4	·34	...	...	...	...
68	Athni	...	...	...	...	...	...
69	Nipáni	1	·05	2	·11	...	...
70	Belgaum Cantonment	1	·12	...	...	...	...
	Dharwar District.						
71	Dhárwár	33	·79	5	·12	...	...
72	Hubli	29	·32	25	·28	...	...
73	Gadag-Bettigeri	13	·28	11	·24	...	...
74	Ránebennur	8	·47	10	·59	...	...
75	Nawalgund	...	...	...	...	...	...
	Bijapur District.						
76	Bijápur	9	·23	11	·28	...	...
77	Bágalkot	7	·45	12	·77	...	...
78	Guledgud	7	·42	...	...	...	...
79	Ilkal	7	·49	...	...	...	...

No. VI (*a*)—*contd.*

6 Malaria.		7 Influenza.		9 Relapsing Fever.		12 Other Fevers.		13 Dysentery.		14 Diarrhœa.	
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
35	2·24	...	...	...	...	12	·77	3	·19	32	2·05
7	·27	1	·02	...	...	14	·51	8	·30	26	·99
18	·38	1	·02	...	...	20	·42	46	·97	44	·93
5	·17	1	·03	...	...	48	1·58	41	1·35	63	2·08
1	·15	...	...	...	...	11	1·66	4	·60	1	·15
...	...	2	·25	...	...	24	2·95	...	...	...	...
...	...	...	...	...	...	105	12·47	4	·47	4	·47
1	·10	...	...	...	...	...	...	3	·31	3	·31
...	...	...	...	...	...	92	3·85	1	·05	5	·21
4	·19	...	...	...	...	51	2·53	...	...	17	·81
...	...	...	...	...	...	89	2·98	...	...	16	·54
...	...	...	...	...	...	99	7·58	...	...	8	·61
16	·39	...	...	...	...	94	2·28	4	·10	36	·87
...	...	...	...	...	...	82	6·96	2	·17	27	2·28
2	·15	...	...	...	...	85	6·27	2	·15	6	·44
4	·22	...	...	...	...	53	2·97	...	...	9	·50
1	·12	...	...	...	...	15	1·82	1	·12	...	...
25	·60	...	...	...	...	131	3·14	9	·22	23	·55
124	1·38	5	·06	...	...	216	2·40	...	...	60	·67
9	·20	1	·02	...	...	266	5·80	3	·07	41	·89
7	·41	...	...	...	...	83	4·89	...	...	48	2·83
1	·16	...	...	...	...	10	1·61	...	...	6	·97
5	·13	...	...	...	...	107	2·69	...	...	29	·73
1	·06	...	...	...	...	109	6·99	1	·06	9	·58
...	...	...	...	...	...	36	2·15	...	...	6	·36
11	·77	...	...	...	...	72	5·05	...	...	5	·35

1	2	15		16		17		18	
No.	Districts and Towns.	Pneumonia.		Phthisis.		Whooping Cough.		Other Respiratory Diseases.	
		Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	B—TOWNS—*contd.*								
	Thana District—contd.								
54	Bhiwandi ...	25	1·60	58	3·71	...	...	25	1·60
55	Kalyán ...	26	·99	48	1·83	...	...	32	1·22
	Bombay Suburban District.								
56	Bandra ...	132	2·75	55	1·16	...	...	44	·93
57	Kurla ...	101	3·33	59	1·95	...	...	43	1·42
	Kolaba District.								
58	Alibág ...	4	·60	6	·90	...	...	8	1·20
59	Mahád ...	...	...	15	1·85	...	...	2	·25
60	Panvel ...	3	·36	28	3·33	...	...	4	·47
61	Uran ...	...	...	15	1·54	...	...	10	1·03
	Ratnagiri District.								
62	Ratnágiri ...	6	·27	37	1·56	...	...	17	·61
63	Vengurla ...	20	·99	41	2·03	...	...	47	2·33
64	Málwan ...	15	·50	43	1·45	...	...	34	1·14
65	Chiplun ...	...	...	27	2·07	...	...	7	·54
	Belgaum District.								
66	Belgaum ...	35	·85	107	2·60	...	...	48	1·16
67	Gokák ...	...	...	33	2·78	...	...	35	2·95
68	Athani ...	4	·29	22	1·62	...	...	39	2·88
69	Nipáni ...	3	·17	23	1·29	...	...	55	3·08
70	Belgaum Cantonment ...	1	·12	3	·37	...	...	3	·37
	Dharwar District.								
71	Dhárwár ...	16	·38	69	1·66	...	...	70	1·68
72	Hubli ...	23	·26	121	1·34	...	...	280	3·11
73	Gadag-Bettigeri ...	24	·52	75	1·64	...	...	94	2·05
74	Ranebennur ...	2	·12	29	1·71	...	...	47	2·77
75	Nawalgund ...	1	·16	1	·16	...	...	10	1·61
	Bijapur District.								
76	Bijápur ...	16	·40	47	1·18	...	...	57	1·43
77	Bágalkot ...	1	·06	25	1·60	...	...	58	3·72
78	Guledgud ...	...	...	44	2·63	...	...	37	2·21
79	Ilkal ...	...	...	16	1·12	...	...	45	3·15

No. VI (*a*)—*contd.*

20 Diphtheria.		21 Chiken-pox.		26 Leprosy.		27 Cancer.		28	29 Deaths under 1 year.			30	31
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths from child birth.	Male.	Female.	Total.	Infant mortality rate per 1,000 births.	No.
...	...	...	...	...	...	...	...	...	34	22	56	210·52	54
...	...	...	...	...	...	...	...	4	35	26	61	121·29	55
...	...	...	...	...	...	...	...	...	119	99	218	141·47	56
...	...	...	...	...	...	...	...	...	92	92	184	219·31	57
...	...	...	...	...	...	...	...	1	9	9	18	68·70	58
...	...	...	...	...	...	...	...	2	12	4	16	65·84	59
...	...	...	...	...	...	...	...	...	21	15	36	120·00	60
...	...	...	...	...	...	...	...	1	3	8	11	103·77	61
...	...	...	...	...	...	...	...	...	11	8	19	46·23	62
...	...	...	...	...	...	...	...	2	28	33	61	78·91	63
...	...	...	...	...	...	..	...	1	41	35	76	99·61	64
...	...	...	...	...	...	...	...	2	24	28	52	13·89	65
...	...	...	...	...	...	...	...	11	72	68	140	108·78	66
...	...	...	...	...	...	...	...	...	38	22	60	124·22	67
...	...	...	...	...	...	...	...	4	8	19	27	60·63	68
...	...	...	...	...	...	...	...	3	30	18	48	94·86	69
...	...	...	...	...	...	...	...	...	6	3	9	145·16	70
...	...	...	...	...	...	...	...	7	74	42	116	79·62	71
...	...	...	...	...	...	...	...	14	80	80	160	70·50	72
...	...	...	...	...	...	...	...	...	206	141	347	164·22	73
...	...	...	...	...	...	...	...	3	48	34	82	121·12	74
...	...	...	...	...	...	...	...	...	7	11	18	72·87	75
...	...	...	...	...	...	...	...	1	118	88	206	135·88	76
...	...	...	...	...	...	...	...	7	61	41	102	116·70	77
...	...	...	...	...	...	...	...	10	42	37	79	123·87	78
...	...	...	...	...	...	...	...	4	45	30	75	198·41	79

1	2	3		4		5	
		Enteric Fever.		Measles.		Cerebro-spinal Fever.	
No.	Districts and Towns.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	B—TOWNS—*contd.*						
	Kanara District.						
80	Karwar	4	·25	...	...	...	...
81	Kumta	5	·34	...	...	...	...
82	Gokarn	9	1·06	...	...	...	...
83	Honawar	1	·13	...	...	...	...
84	Bhatkal	...	...	...	...	...	...
	Sholapur District.						
85	Sholapur	90	·62	217	1·50	1	·01
86	Barsi	1	·36	20	·72	...	...
87	Pandharpur	8	·27	62	2·10	...	...
	Satara District.						
88	Satara	5	·18	30	1·13	...	...
89	Wai	4	·34	5	·42	...	...
90	Karad	10	·69	3	·20	...	...
91	Ashta	1	·09	5	·43	...	...
92	Islampur	1	·09	...	...	...	...
	Total of Towns ...	1,191	·33	1,332	·37	225	·06
	Total of the Province ...	6,105	·34	3,670	·20	227	·01

No. VI (*a*)—*concld.*

6 Malaria.		7 Influenza.		8 Relapsing Fever.		12 Other Fevers.		13 Dysentery.		14 Diarrhœa.	
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
11	·68	..	...	...	...	...	...	1	·06	3	·19
2	·14	...	...	...	...	32	2·20	7	·48	27	1·86
2	·24	...	...	...	...	36	4·23	19	2·23	6	·71
...	...	...	...	...	...	41	5·15	...	...	10	1·26
5	·56	...	...	...	...	39	4·36	9	1·07	25	2·80
37	·25	2	·13	...	...	122	·84	106	·73	362	2·50
3	·11	...	...	...	...	327	11·84	...	...	34	1·23
7	·23	...	...	...	...	92	3·12	87	2·95	142	4·82
2	·08	...	...	...	...	153	5·80	1	·03	39	1·47
2	·17	...	...	...	...	29	2·46	4	·34	23	1·95
...	...	...	...	...	...	43	2·97	...	...	7	·48
...	...	...	...	...	...	47	4·17	...	...	15	1·33
1	·09	...	...	...	...	30	2·79	...	...	10	·93
1,923	·54	92	·03	1	·00	14,857	4·17	1,818	·51	4,521	1·27
25,373	1·41	153	·01	1	·00	128,601	7·12	4,304	·24	23,790	1·33

1	2	15		16		17		18	
		Pneumonia.		Phthisis.		Whooping Cough.		Other Respiratory Diseases.	
No.	Districts and Towns.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.
	B—TOWNS—*contd.*								
	Kanara District.								
80	Karwar	...	...	8	·50	...	...	5	·31
81	Kumta	1	·07	13	·89	...	...	13	·89
82	Gokarn	6	·71	16	1·88	...	...	3	·35
83	Honawar	...	...	...	...	...	...	6	·75
84	Bhatkal	...	...	3	·34	...	...	24	2·69
	Sholapur District.								
85	Sholapur	1,105	7·63	579	4·00	...	...	684	4·72
86	Barsi	5	·18	24	·86	...	...	64	2·31
87	Pandharpur	296	10·47	54	1·83	...	...	146	4·95
	Satara District.								
88	Satara	20	·75	47	1·78	...	...	53	2·00
89	Wai	10	·85	16	1·36	...	...	13	1·10
90	Karad	7	·48	14	·96	...	...	12	·80
91	Ashta	9	·79	9	·79	...	...	12	1·06
92	Islampur	3	·27	17	1·58	...	...	7	·65
	Total of Towns ...	14,861	4·18	7,326	2·06	69	·02	11,258	3·16
	Total of the Province ...	21,038	1·17	25,123	1·40	142	·01	65,184	3·64

No. VI (*a*)—*concld.*

20 Diphtheria.		21 Chicken-pox.		26 Leprosy.		27 Cancer.		28	29 Deaths under 1 year.			30	31
Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths.	Ratio.	Deaths from child birth.	Male.	Female.	Total.	Infant mortality rate per 1,000 births.	No.
...	...	...	...	...	...	...	...	2	6	6	12	31·50	80
...	...	...	...	...	...	...	...	2	11	10	21	61·95	81
...	...	...	...	...	...	...	...	6	13	17	30	111·94	82
...	...	...	...	...	...	...	...	2	5	2	7	30·57	83
...	...	...	...	...	...	...	...	2	11	14	25	81·70	84
...	...	...	...	...	...	...	...	55	738	647	1,385	198·42	85
...	...	...	...	..	...	...	...	6	174	152	326	261·01	86
...	...	...	...	...	...	...	...	7	253	222	475	426·77	87
..	...	...	...	...	...	...	...	11	85	57	142	240·27	88
...	...	...	...	...	...	...	...	1	27	14	41	94·04	89
...	...	...	...	...	...	...	...	2	15	14	29	95·71	90
...	...	...	...	...	...	...	...	...	23	14	37	105·11	91
...	...	...	...	...	...	...	...	2	11	8	19	93·60	92
4	·00	2	·00	15	·00	76	·02	693	14,780	12,959	27,739	217·13	
79	·00	10	·00	188	·01	119	·01	3,093	23,248	54,010	117,258	160·74	

ANNUAL FORM NO. VII—DEATHS *registered from during each month*

1	2	3		4		5					
No.	Districts.	Circles of Registration.		Villages.		January.	February.	March.	April.	May.	June.
		Number in each District.	Number from which deaths from Cholera were reported.	Number in each District.	Number from which deaths from Cholera were reported.						
1	City of Bombay ...	1	1	1	1	...	...	...	1	1	...
	Northern Registration District.										
2	East Khandesh ...	23	20	1,491	184	...	...	...	1	33	49
3	West Khandesh ...	10	10	1,293	418	...	...	...	2	361	338
4	Surat	11	4	782	12	...	...	...	1	...	...
5	Broach	7	3	405	3	...	...	...	...	...	...
6	Kaira	15	2	572	2	...	...	...	...	...	1
7	Panch Mahals ...	7	...	651	...	...	...	...	...	...	...
8	Ahmedabad ...	13	...	876	...	...	...	...	...	...	...
	Central Registration District.										
9	Ahmednagar ...	15	15	1,357	234	2	6	...	168	190	9
10	Poona	19	11	1,157	14	12	2	...	8	10	4
11	Nasik	19	19	1,646	231	...	1	...	59	198	83
12	Thana	15	15	1,552	87	22	2	...	...	1	28
13	Bombay Suburban ...	4	1	95	1	...	...	...	...	1	...
14	Kolaba	12	8	1,476	61	11	64	2	1	7	...
15	Ratnagiri	15	5	1,305	63	...	...	...	41	116	...
	Southern Registration District.										
16	Belgaum	14	6	1,089	12	9	1	...	1	4	2
17	Dharwar	18	14	1,296	86	84	1	13	98	102	24
18	Bijapur	13	11	1,120	48	9	...	1	4	4	42
19	Kanara	16	1	1,233	1	3	...	...	...	...	...
20	Sholapur	10	10	717	95	9	1	1	3	37	47
21	Satara	18	14	1,341	244	59	79	69	133	522	120
	Total for the Province ...	275	170	21,455	1,797	220	157	86	521	1,587	747

CHOLERA *in the* DISTRICTS *of the* BOMBAY PROVINCE *of the year 1937.*

July.	August.	September.	October.	November.	December.	6 Total. Male.	6 Total. Female.	6 Total. Total.	7 Ratio of Deaths per 1,000 of Population. Male.	7 Ratio of Deaths per 1,000 of Population. Female.	7 Ratio of Deaths per 1,000 of Population. Total	8 Mean ratio per 1,000 of previous five years.	9 No.
1	1	...	...	...	...	2	2	4	·00	·00	·00	·01	1
213	585	112	32	10	1	509	527	1,036	·83	·89	·86	·97	2
462	1,668	786	116	3	...	1,813	1,923	3,736	4·85	5·30	5·07	·48	3
...	8	24	9	13	...	33	22	55	·08	·06	·07	·09	4
...	9	6	2	...	...	9	8	17	·05	·05	0·5	·04	5
...	...	...	...	...	1	2	...	2	·00	...	·00	·05	6
...	...	...	...	...	...	...	...	...	...	...	...	·10	7
...	...	...	...	...	...	...	...	...	...	...	...	·00	8
62	289	154	134	20	1	501	534	1,035	1·01	1·09	1·05	1·02	9
1	3	...	...	1	...	25	16	41	·04	·03	·03	·78	10
420	625	284	136	30	1	908	929	1,837	1·79	1·89	1·84	·98	11
10	52	66	66	72	111	210	220	430	·48	·54	·51	·49	12
...	...	...	7	2	...	7	3	10	·07	·04	·06	·08	13
41	39	132	31	28	4	166	194	360	·52	·62	·57	·27	14
...	...	1	1	29	...	103	85	188	·17	·11	·14	·02	15
...	...	2	...	...	...	10	9	19	·02	·02	·02	·39	16
16	2	1	...	...	1	205	137	342	·36	·26	·31	·37	17
84	35	8	3	...	...	101	89	190	·23	·21	·22	·71	18
...	...	...	...	...	...	2	1	3	·01	·00	·01	·02	19
109	144	114	33	2	1	271	230	501	·60	·54	·57	1·21	20
50	73	52	28	1	...	649	537	1,186	1·10	·91	1·01	·82	21
1,469	3,533	1,742	589	211	121	5,526	5,466	10,992	·60	·63	·61	·48	

ANNUAL FORM NO. VIII—DEATHS *registered from during each month*

1	2	3		4		5					
No.	Districts.	Circles of Registration.		Villages.		January.	February.	March.	April.	May.	June.
		Number in each District.	Number from which deaths from Small-pox were reported.	Number in each District.	Number from which deaths from Small-pox were reported.						
1	City of Bombay ...	1	1	1	1	16	30	62	79	90	81
	Northern Registration District.										
2	East Khandesh ...	23	11	1,491	49	19	11	21	42	19	10
3	West Khandesh ...	10	4	1,293	6	...	....	...	1	...	7
4	Surat	11	8	782	16	3	4	4	8	5	1
5	Broach	7	5	405	32	21	22	24	22	21	3
6	Kaira	15	6	572	6	12	26	9	4	...	2
7	Panch Mahals ...	7	7	651	29	...	...	10	17	10	7
8	Ahmedabad ...	13	7	876	14	11	10	13	29	27	10
	Central Registration District.										
9	Ahmednagar ...	15	8	1,357	14	4	1	...	2	...	2
10	Poona	19	9	1,157	9	6	2	4	1	...	1
11	Nasik	19	8	1,646	5	6	10	14	21	17	10
12	Thana	15	5	1,552	11	9	...	1	5	4	...
13	Bombay Suburban ...	4	2	95	2	...	2	1	1	1	...
14	Kolaba	12	9	1,476	13	2	...	8	8	11	2
15	Ratnagiri	15	13	1,305	67	13	20	25	25	18	11
	Southern Registration District.										
16	Belgaum	14	2	1,089	2	2	2	...	2	2	...
17	Dharwar	18	4	1,296	6	...	1	2	1	2	...
18	Bijapur	13	6	1,120	18	3	2	5	5	9	2
19	Kanara	16	5	1,233	15	8	8	4	4	4	2
20	Sholapur	10	7	717	20	6	5	5	6	6	7
21	Satara	18	11	1,341	42	10	14	17	10	14	8
	Total for the Province ...	275	138	21,455	377	151	170	229	290	260	166

SMALL-POX *in the* DISTRICTS *of the* BOMBAY PROVINCE *of the year 1937.*

July	August.	September.	October.	November.	December.	6 Total. Male.	6 Total. Female.	6 Total. Total.	7 Number of these Deaths among Children. Under 1 year.	7 Number of these Deaths among Children. Under 10 years.	8 Total ratio of Deaths per 1,000 of Population. Male.	8 Total ratio of Deaths per 1,000 of Population. Female.	8 Total ratio of Deaths per 1,000 of Population. Total.	9 Mean ratio per 1,000 for previous five years.	10 No.
58	32	24	20	39	156	351	336	687	165	296	·47	·81	·59	·91	1
9	1	2	...	...	...	73	61	134	41	86	·12	·10	·11	·37	2
2	...	...	...	...	...	4	6	10	1	7	·01	·02	·01	·61	3
1	5	...	...	...	1	14	18	32	10	15	·03	·05	·04	·33	4
2	...	...	...	...	...	47	68	115	30	69	·27	·43	·34	·25	5
...	...	...	...	2	3	27	31	58	18	35	·07	·09	·08	·20	6
4	2	...	...	...	...	25	25	50	10	25	·11	·11	·11	·15	7
2	3	...	...	...	...	59	46	105	34	50	·11	·10	·11	·25	8
2	2	2	...	...	1	5	11	16	4	7	·01	·02	·02	·22	9
3	3	...	1	1	7	14	15	29	4	5	·02	·03	·02	·37	10
7	5	4	2	3	5	44	60	104	34	40	·08	·12	·10	·46	11
...	2	2	1	...	4	17	11	28	3	3	·04	·03	·03	·21	12
1	1	...	...	1	1	3	6	9	3	1	·03	·08	·05	·15	13
4	4	2	...	6	11	33	25	58	14	16	·10	·08	·09	·25	14
6	2	4	4	4	8	56	84	140	19	37	·09	·13	·11	·20	15
...	...	...	...	...	...	1	7	8	3	2	·00	·01	·01	·32	16
...	...	...	...	...	...	4	2	6	1	3	·01	·00	·01	·15	17
3	...	...	1	...	9	16	20	36	11	16	·04	·05	·04	·16	18
1	...	...	...	...	1	14	18	32	6	14	·07	·09	·08	1·33	19
5	5	...	...	1	1	21	26	47	12	18	·05	·06	·05	·28	20
7	5	3	1	10	7	57	49	106	20	59	·10	·08	·09	·22	21
117	72	43	30	67	215	885	925	1,810	443	804	·10	·11	·11	·34	

ANNUAL FORM No. IX—DEATHS *registered from during each month*

1	2	3		4		5					
No.	Districts.	Circles of Registration.		Villages.							
		Number in each District.	Number from which deaths from fevers were reported.	Number in each District.	Number from which deaths from fevers were reported.	January.	February.	March.	April.	May	June
1	City of Bombay ...	1	1	1	1	229	178	160	203	211	182
	Northern Registration District.										
2	East Khandesh ...	23	23	1,491	1,438	1,422	1,284	1,416	1,814	2,156	1,425
3	West Khandesh ...	10	10	1,293	1,138	770	628	669	657	618	458
4	Surat	11	11	782	700	651	432	578	570	493	429
5	Broach	7	7	405	397	420	346	390	393	368	333
6	Kaira	15	15	572	554	593	572	706	607	637	425
7	Panch Mahals ...	7	7	651	645	556	479	548	526	482	377
8	Ahmedabad ...	13	13	876	876	1,195	1,218	1,171	1,145	881	702
	Central Registration District.										
9	Ahmednagar ...	15	15	1,357	1,026	436	357	344	382	495	361
10	Poona	19	19	1,157	1,034	910	765	822	939	1,104	774
11	Nasik	19	19	1,646	795	864	712	723	969	829	640
12	Thana	15	15	1,552	1,219	805	501	598	579	438	343
13	Bombay Suburban ...	4	4	95	49	72	52	68	61	51	57
14	Kolaba	12	12	1,476	1,111	540	397	489	495	404	302
15	Ratnagiri	15	15	1,305	815	632	580	644	746	626	532
	Southern Registration District.										
16	Belgaum ...	14	14	1,089	959	504	529	531	465	711	467
17	Dharwar ...	18	18	1,296	1,094	991	720	815	680	616	510
18	Bijapur ...	13	13	1,120	972	596	399	413	429	498	411
19	Kanara ...	16	16	1,233	872	479	368	358	299	264	260
20	Sholapur	10	10	717	674	673	483	538	495	810	562
21	Satara	18	18	1,341	1,234	784	616	670	932	1,210	889
	Total for the Province ...	275	275	21,455	17,603	14,122	11,616	12,651	13,386	13,902	10,439

FEVERS *in the* DISTRICTS *of the* BOMBAY PROVINCE *of the year 1937.*

July.	August.	September.	October.	November.	December.	6 Total. Male.	Female.	Total.	7 Ratio of Deaths per 1,000 of population. Male.	Female.	Total.	8 Mean ratio per 1,000 of previous five years.	9 No.
170	195	209	192	184	219	1,221	1,111	2,332	1·63	2·68	2·01	1·80	1
1,345	1,972	2,143	1,761	1,603	1,551	9,759	10,133	19,892	15·92	17·07	16·49	14·89	2
600	998	1,100	898	980	1,026	4,566	4,836	9,402	12·21	13·32	12·76	11·89	3
429	533	555	579	673	738	3,192	3,468	6,660	8·50	9·36	8·93	9·56	4
343	532	467	579	615	564	2,651	2,699	5,350	15·16	16·95	16·01	15·22	5
525	744	687	798	780	607	3,875	3,806	7,681	9·81	10·98	10·36	10·35	6
448	713	953	889	931	709	3,807	3,804	7,611	16·08	17·45	16·75	14·32	7
796	1,371	1,738	2,210	2,438	2,093	8,251	8,707	16,958	15·65	18·47	16·99	14·20	8
423	553	501	511	449	374	2,642	2,544	5,186	5·31	5·23	5·27	6·04	9
791	958	1,033	990	1,049	997	5,793	5,339	11,132	9·80	9·44	9·63	9·32	10
634	865	890	796	918	1,106	5,006	4,940	9,946	9·86	10·07	9·97	12·38	11
315	365	380	386	416	522	2,856	2,792	5,648	6·63	6·87	6·75	7·09	12
45	39	43	38	69	51	312	334	646	3·03	4·38	3·61	2·58	13
325	345	442	365	410	436	2,473	2,477	4,950	7·85	7·90	7·88	7·49	14
561	587	616	653	572	618	3,433	3,934	7,367	5·63	5·67	5·65	5·83	15
412	421	477	543	580	696	3,311	3,025	6,336	6·02	5·78	5·90	6·67	16
456	605	654	745	843	1,087	4,356	4,366	8,722	7·70	8·13	7·91	9·72	17
447	459	528	531	538	570	2,881	2,938	5,819	6·54	6·85	6·69	10·14	18
322	243	240	284	328	412	1,852	2,005	3,857	8·65	9·84	9·23	9·20	19
607	797	799	778	573	591	3,925	3,781	7,706	8·65	8·92	8·78	10·39	20
823	987	1,042	1,087	924	965	5,567	5,362	10,929	9·40	9·13	9·26	8·30	21
10,817	14,282	15,497	15,613	15,873	15,932	81,729	82,401	164,130	8·80	9·53	9·15	9·18	

ANNUAL FORM NO. X—DEATHS *registered from* DYSENTERY *during each month*

1	2	3		4		5					
		Circles of Registration.		Villages.							
No.	Districts.	Number in each District.	Number from which deaths from Dysentery and Diarrhœa were reported.	Number in each District.	Number from which deaths from Dysentery and Diarrhœa were reported.	January.	February.	March.	April.	May.	June.
1	City of Bombay ...	1	1	1	1	108	94	107	102	153	135
	Northern Registration District.										
2	East Khandesh ...	23	23	1,491	438	116	82	99	107	120	95
3	West Khandesh ...	10	10	1,293	300	56	34	50	48	56	36
4	Surat	11	11	782	112	35	31	39	53	48	62
5	Broach	7	7	405	101	20	13	15	10	12	8
6	Kaira	15	15	572	235	42	24	57	39	49	56
7	Panch Mahals ...	7	7	651	147	6	7	10	12	16	16
8	Ahmedabad ...	13	13	876	169	94	68	65	81	59	55
	Central Registration District.										
9	Ahmednagar ...	15	15	1,357	737	170	120	109	117	161	139
10	Poona	19	19	1,157	793	195	135	182	170	217	220
11	Nasik	19	15	1,646	149	91	69	67	98	113	86
12	Thana	15	15	1,552	325	143	73	92	92	57	70
13	Bombay Suburban ...	4	4	95	46	40	20	19	40	24	20
14	Kolaba	12	11	1,476	349	100	61	62	69	72	51
15	Ratnagiri	15	15	1,305	245	88	67	58	48	71	48
	Southern Registration District.										
16	Belgaum	14	14	1,089	554	143	94	99	139	210	214
17	Dharwar	18	18	1,296	263	89	49	53	77	86	65
18	Bijapur	13	13	1,120	445	117	73	70	59	86	69
19	Kanara	16	16	1,233	345	107	72	82	63	56	55
20	Sholapur	10	10	717	400	109	79	113	107	122	99
21	Satara	18	18	1,341	617	118	76	66	118	157	147
	Total for the Province ...	275	274	21,455	6,771	1,987	1,341	1,514	1,4	1,945	1,746

and DIARRHŒA *in the* DISTRICTS *of the* BOMBAY PROVINCE *of the year 1937.*

July.	August.	September.	October.	November.	December.	6 Total. Male.	6 Total. Female.	6 Total. Total.	7 Ratio of Deaths per 1,000 of Population. Male.	7 Ratio of Deaths per 1,000 of Population. Female.	7 Ratio of Deaths per 1,000 of Population. Total.	8 Mean ratio per 1,000 of previous five years.	9 No.
203	272	161	101	106	106	877	771	1,648	1·17	1·86	1·42	1·02	1
162	317	275	148	121	100	865	877	1,742	1·41	1·48	1·45	1·08	2
86	214	176	74	54	38	450	472	922	1·20	1·30	1·25	·77	3
84	126	69	62	40	30	356	323	679	·95	·87	·91	·72	4
27	66	46	26	11	12	137	129	266	·78	·81	·80	·60	5
93	177	122	109	55	37	423	437	860	1·07	1·26	1·16	1·15	6
18	68	67	53	29	19	147	174	321	·62	·80	·71	·45	7
136	266	169	92	113	69	659	608	1,267	1·25	1·29	1·27	1·00	8
188	373	413	343	200	122	1,264	1,191	2,455	2·54	2·49	2·50	2·05	9
259	448	485	352	253	189	1,722	1,383	3,105	2·91	2·45	2·69	1·82	10
169	302	217	148	100	105	838	727	1,565	1·65	1·46	1·56	1·52	11
89	122	145	92	69	76	601	519	1,120	1·39	1·27	1·34	1·19	12
44	82	53	47	34	55	247	231	478	2·40	3·02	2·67	2·04	13
94	162	180	94	62	95	571	531	1,102	1·81	1·69	1·75	1·61	14
72	86	53	14	69	85	408	351	759	·66	·51	·58	·56	15
204	208	212	219	205	192	1,037	1,102	2,139	1·89	2·01	1·99	2·45	16
60	88	79	95	94	77	501	411	912	·89	·77	·83	1·10	17
97	163	182	216	188	135	708	747	1,455	1·61	1·74	1·67	2·20	18
86	119	104	143	120	113	620	500	1,120	2·90	2·45	2·68	2·04	19
166	322	352	253	159	118	1,054	945	1,999	2·32	2·23	2·28	2·25	20
171	347	369	306	169	136	1,127	1,053	2,180	1·90	1·79	1·85	1·54	21
2,508	4,328	3,929	2,987	2,251	1,909	14,612	13,482	28,094	1·57	1·56	1·56	1·39	

ANNUAL FORM No. XI—DEATHS *registered from* RESPIRATORY *each month of*

1	2	3		4		5					
		Circles of Registration.		Villages.							
No.	Districts.	Number in each District.	Number from which deaths Respiratory Diseases were reported.	Number in each District.	Number from which deaths Respiratory Diseases were reported.	January.	February.	March.	April.	May.	June.
1	City of Bombay ...	1	1	1	1	1,013	925	1,075	1,146	1,145	1,091
	Northern Registration District										
2	East Khandesh ...	23	23	1,491	1,215	752	662	621	655	764	374
3	West Khandesh ...	10	10	1,293	948	458	371	332	717	647	508
4	Surat	11	11	782	654	741	517	553	561	559	456
5	Broach	7	7	405	309	231	184	212	186	154	157
6	Kaira	15	15	572	555	768	747	794	803	643	554
7	Panch Mahals ...	7	7	651	432	188	157	184	178	140	132
8	Ahmedabad ...	13	13	876	620	954	761	880	1,013	756	531
	Central Registration District.										
9	Ahmednagar ...	15	15	1,357	1,107	763	573	467	481	552	435
10	Poona	19	19	1,157	569	882	531	630	610	578	454
11	Nasik	19	19	1,646	571	722	514	486	579	469	374
12	Thana	15	15	1,552	1,052	666	470	521	510	360	323
13	Bombay Suburban ...	4	4	95	50	87	55	72	96	75	64
14	Kolaba	12	12	1,476	862	344	292	317	274	275	267
15	Ratnagiri	15	15	1,305	672	575	410	525	481	471	398
	Southern Registration District.										
16	Belgaum	14	14	1,089	748	359	278	304	329	414	290
17	Dharwar	18	18	1,296	756	506	400	473	344	296	256
18	Bijapur	13	13	1,120	706	360	252	268	226	227	200
19	Kanara	16	13	1,233	424	137	118	95	84	45	56
20	Sholapur	10	10	717	482	478	853	406	365	474	332
21	Satara	18	18	1,341	804	328	247	267	273	384	253
	Total for the Province ...	275	272	21,455	13,537	11,312	8,817	9,487	9,911	9,428	7,505

DISEASES *in the* DISTRICTS *of the* BOMBAY PROVINCE *during the year 1937.*

July.	August.	September.	October.	November.	December.	6 Total. Male.	6 Total. Female.	6 Total. Total.	7 Ratio of Deaths per 1,000 of Population. Male.	7 Ratio of Deaths per 1,000 of Population. Female.	7 Ratio of Deaths per 1,000 of Population. Total.	8 Mean ratio per 1,000 of previous five years.	9 No.
1,218	1,222	1,009	1,071	1,062	1,263	7,212	6,028	13,240	9·65	14·56	11·40	9·82	1
313	552	508	547	593	669	3,899	3,111	7,010	6·36	5·24	5·81	4·62	2
228	662	484	295	336	370	2,960	2,448	5,408	7·91	6·74	7·33	5·54	3
473	574	574	610	603	751	3,720	3,257	6,977	9·91	8·79	9·35	8·98	4
159	192	159	217	219	257	1,305	1,022	2,327	7·46	6·42	6·96	6·06	5
608	822	781	764	750	704	4,824	3,914	8,738	12·21	11·29	11·78	9·45	6
98	149	155	202	206	226	1,237	778	2,015	5·23	3·57	4·43	3·24	7
534	821	775	733	785	976	5,271	4,248	9,519	10·00	9·01	9·53	8·42	8
488	516	499	540	489	462	3,221	3,044	6,265	6·47	6·27	6·37	5·69	9
519	543	664	609	583	591	3,548	3,646	7,194	6·00	6·45	5·23	5·91	10
420	586	549	533	557	659	3,316	3,132	6,448	6·53	6·38	6·46	6·15	11
283	376	415	395	326	465	2,840	2,270	5,110	6·59	5·59	6·11	5·49	12
74	50	110	81	53	67	457	427	884	4·44	5·60	4·92	4·83	13
232	324	348	291	255	287	1,937	1,569	3,506	6·15	5·00	5·57	5·39	14
419	498	464	344	433	531	2,980	2,569	5,549	4·90	3·70	4·26	3·35	15
247	326	281	377	353	392	2,246	1,704	3,950	4·09	3·25	3·68	3·87	16
245	297	298	347	336	445	2,357	1,886	4,243	4·17	3·51	3·85	3·81	17
185	216	236	331	309	350	1,783	1,377	3,160	4·05	3·21	3·64	4·35	18
73	86	78	107	89	104	606	466	1,072	2·83	2·29	2·57	2·41	19
360	414	427	501	436	573	2,515	2,604	5,119	5·55	6·14	5·83	4·69	20
273	329	368	386	300	345	1,935	1,818	3,753	3·27	3·10	3·18	2·67	21
7,449	9,555	9,182	9,281	9,073	10,487	60,169	51,318	111,487	6·48	5·95	6·22	5·51	

ANNUAL FORM NO XII.—DEATHS *registered from during each month*

1	2	3		4		5					
No.	Districts.	Circles of Registration.		Villages.		January.	February.	March.	April.	May.	June.
		Number in each District.	Number from which deaths from Plague were reported.	Number in each District.	Number from which deaths from Plague were reported.						
1	City of Bombay ...	1	...	1	...	...	...	...	...	...	...
	Northern Registration District.										
2	East Khandesh ...	23	...	1,491	...	...	...	...	...	...	...
3	West Khandesh ...	10	...	1,293	...	...	...	...	...	...	...
4	Surat	11	...	782	...	...	...	...	...	...	...
5	Broach	7	...	405	...	...	...	...	...	...	...
6	Kaira	15	...	572	...	...	...	...	...	...	...
7	Panch Mahals ...	7	...	651	...	...	...	...	...	...	...
8	Ahmedabad ...	13	...	876	...	...	...	...	...	...	...
	Central Registration District.										
9	Ahmednagar ...	15	...	1,357	...	...	...	...	...	...	...
10	Poona	19	...	1,157	...	...	...	...	...	...	...
11	Nasik	19	1	1,646	1	...	...	1	...	...	...
12	Thana	15	...	1,552	...	...	...	...	...	...	...
13	Bombay Suburban ...	4	...	95	...	...	...	...	...	...	...
14	Kolaba	12	...	1,476	...	...	...	...	...	...	...
15	Ratnagiri	15	1	1,305	1	...	...	...	...	...	...
	Southern Registration District.										
16	Belgaum ...	14	7	1,089	33	6	14	7	8	5	6
17	Dharwar	18	12	1,296	23	26	22	33	10	1	...
18	Bijapur	13	1	1,120	1	...	...	...	...	...	...
19	Kanara	16	5	1,233	10	3	2	1	5	3	3
20	Sholapur	10	1	717	1	1	...	...	...	...	...
21	Satara	18	3	1,341	7	34	19	14	5	...	...
	Total for the Province ...	275	31	21,455	77	70	57	56	28	9	9

PLAGUE *in the* DISTRICTS *of the* BOMBAY PROVINCE *of the year 1937.*

July.	August.	September.	October.	November.	December.	6 Total. Male.	Female.	Total.	7 Ratio of Deaths per 1,000 of Population. Male.	Female.	Total.	8 Mean ratio per 1,000 of previous five years.	9 No.
...	...	...	...	...	...	...	...	...	...	...	...	·02	1
...	...	...	...	...	...	...	...	...	...	...	...	...	2
...	...	...	...	...	...	...	...	...	...	...	...	·00	3
...	...	...	...	...	...	...	...	...	...	...	...	·02	4
...	...	...	...	...	...	...	...	...	...	...	...	...	5
...	...	...	...	...	...	...	...	...	...	...	...	·31	6
...	...	...	...	...	...	...	...	...	...	...	...	...	7
...	...	...	...	...	...	...	...	...	...	...	...	...	8
...	...	...	...	...	...	...	...	...	...	...	...	·03	9
...	...	...	...	...	...	...	...	...	...	...	...	·49	10
...	...	...	...	...	...	...	1	1	...	·00	·00	·00	11
...	...	...	...	...	...	...	...	...	...	...	...	·07	12
...	...	...	...	...	...	...	...	...	...	...	...	...	13
...	...	...	...	...	...	...	...	...	...	...	...	...	14
...	...	...	...	...	1	...	1	1	...	·00	·00	·02	15
35	40	30	15	30	22	102	116	218	·20	·22	·20	2·49	16
4	3	19	17	23	8	66	100	166	·12	·19	·14	1·97	17
...	...	...	1	...	...	...	1	1	...	·00	·00	3·13	18
3	4	4	7	...	4	24	15	39	·11	·08	·09	·33	19
...	...	...	...	...	...	...	1	1	...	·00	·00	·68	20
...	...	...	7	...	...	39	40	79	·07	·07	·07	1·52	21
42	47	53	47	53	35	231	275	506	·02	·03	·03	·62	

APPENDIX

STATEMENT

Showing the Particulars of Vaccination in the

No.	Districts or Towns.	Population of District according to census of 1931.	Average number of Vaccinators employed throughout the year.
1	2	3	4
	A—DISTRICTS (EXCLUDING TOWNS).		
1	Ahmednagar	915,322	17
2	Poona	904,827	15
3	Nasik	894,327	17
4	Thana	788,518	17
5	Bombay Suburban	103,462	2
6	Kolaba	605,522	14
7	Ratnagiri	1,215,590	21
8	Belgaum	998,640	17
9	Dharwar	908,205	19
10	Bijapur	813,876	15
11	Kanara	387,159	15
12	Satara	1,105,106	19
13	Sholapur	675,796	11
14	Surat	562,852	12
15	Broach	276,125	5
16	Kaira	626,955	10
17	Panch Mahals	397,323	7
18	Ahmedabad	644,195	12
19	East Khandesh	1,018,466	17
20	West Khandesh	677,196	12
	Total of Districts (excluding towns) ...	14,519,462	274

IV.

No. I.

Bombay Province during the year 1937-38.

Total number of persons vaccinated.			Average number of persons vaccinated by each Vaccinator.	Primary Vaccination.				
				Total.	Successful.			Unknown.
					Under one year.	One and under six years.	Total of all ages.	
Male.	Female.	Total.						
5	6	7	8	9	10	11	12	13
P. 17,485	15,631	33,116	2,167	33,116	27,242	4,240	31,582	1,528
R. 3,143	586	3,729						
P. 15,302	15,039	30,341	2,497	30,341	20,950	7,510	28,887	1,444
R. 5,316	1,081	7,117						
P. 16,654	16,361	33,015	2,297	33,015	24,936	6,068	31,260	1,727
R. 5,229	815	6,044						
P. 13,237	13,016	26,253	1,778	26,253	17,320	7,566	25,065	1,176
R. 3,042	931	3,973						
P. 1,839	1,843	3,682	4,954	3,682	2,163	1,082	3,336	343
R. 4,191	2,036	6,227						
P. 10,432	9,945	20,377	1,839	20,377	14,639	5,047	19,932	439
R. 3,997	1,380	5,377						
P. 20,069	18,707	38,776	2,606	38,776	26,037	9,037	36,619	2,142
R. 10,707	5,262	15,969						
P. 16,973	16,656	33,629	2,624	33,629	23,763	7,770	31,739	1,825
R. 11,965	1,632	13,597						
P. 14,533	14,196	28,729	2,252	28,729	20,142	6,704	27,068	1,657
R. 11,859	2,195	14,054						
P. 15,167	14,928	30,095	2,979	30,096	22,355	6,377	28,893	1,192
R. 11,591	2,999	14,590						
P. 5,248	4,524	9,772	1,005	9,772	1,747	6,050	9,069	654
R. 4,284	1,017	5,301						
P. 18,633	18,009	36,642	2,943	36,642	26,291	6,486	33,245	3,314
R. 15,658	3,619	19,277						
P. 12,075	11,700	23,775	3,034	23,775	16,187	4,654	20,999	2,771
R. 8,285	1,376	9,661						
P. 10,483	10,043	20,526	1,970	20,526	13,791	5,478	19,756	756
R. 2,287	829	3,116						
P 4,534	4,304	8,838	1,868	8,838	5,826	2,322	8,288	534
R. 404	99	503						
P. 12,763	11,345	24,108	2,628	24,110	17,496	5,185	22,751	1,237
R. 1,784	392	2,176						
P. 7,483	7,235	14,718	3,117	14,720	11,834	2,040	13,924	757
R. 4,639	2,460	7,099						
P. 11,839	11,223	23,062	2,047	23,066	16,536	4,760	21,415	1,567
R. 1,245	257	1,502						
P. 19,064	17,907	36,971	2,428	36,972	27,143	7,996	35,878	1,037
R. 3,965	345	4,310						
P. 13,428	13,307	26,735	2,259	26,735	20,410	5,220	25,770	906
R. 324	50	374						
P. 257,241	245,919	503,160	2,362	503,170	356,808	111,592	475,476	27,066
R. 113,915	30,081	143,996						

STATEMENT

No.	Districts or Towns.	Re-vaccination.		
		Total.	Successful.	Unknown.
1	2	14	15	16
	A—DISTRICTS (EXCLUDING TOWNS).			
1	Ahmednagar	3,729	2,220	751
2	Poona	7,117	2,001	2,799
3	Nasik	6,044	2,161	2,016
4	Thana	3,973	1,673	1,146
5	Bombay Suburban	6,227	1,312	2,549
6	Kolaba	5,377	2,483	1,413
7	Ratnagiri	15,969	7,507	4,013
8	Belgaum	13,597	2,110	4,432
9	Dharwar	14,054	2,258	4,486
10	Bijapur	14,590	3,877	5,687
11	Kanara	5,301	1,072	1,647
12	Satara	19,277	2,027	9,360
13	Sholapur	9,679	5,619	1,872
14	Surat	3,116	607	1,359
15	Broach	503	138	120
16	Kaira	2,180	429	371
17	Panch Mahals	7,099	905	2,889
18	Ahmedabad	1,502	322	264
19	East Khandesh	4,310	1,827	430
20	West Khandesh	374	133	62
	Total of Districts (excluding towns) ...	144,018	40,681	47,666

* Includes cost of (Rs. 33,948-1-0) for Inspectors of Sanitation and Vaccination in Southern

No. I—*contd.*

Percentage of successful cases in which the results were known.		Persons successfully vaccinated per 1,000 of population.	Total cost of Vaccination Department.	Number of all successful vaccinations and re-vaccinations performed by the vaccination staff only.	Average cost of each successful case performed by the vaccination staff.
Primary.	Re-vaccination.				
17	18	19	20	21	22
			Rs. a. p.		Rs. a. p.
99·98	74·55	36·94	15,878 15 0	33,802	0 7 6
99·97	46·34	34·14	13,818 11 0	30,888	0 7 2
99·91	53·65	37·26	16,010 0 0	33,421	0 7 9
99·95	59·18	33·91	16,248 4 0	26,738	0 9 9
99·91	35·67	44·92	1,969 9 0	4,648	0 6 9
99·97	62·64	35·35	12,419 0 0	22,415	0 8 10
99·95	62·78	36·29	18,337 11 0	44,126	0 6 8
99·80	23·02	33·78	15,671 7 6	33,849	0 7 5
99·99	23·60	32·29	19,775 0 0	29,326	0 10 9
99·96	43·55	40·27	15,969 2 0	32,770	0 7 10
99·46	29·34	26·19	12,233 11 9	10,141	1 3 3
99·94	20·44	31·92	18,478 11 3	35,272	0 8 5
99·98	71·97	39·39	11,395 9 0	26,618	0 6 10
99·93	34·55	36·17	12,356 12 3	20,363	0 9 8
99·81	36·31	30·51	4,313 0 3	8,426	0 8 2
99·47	23·71	36·97	9,147 0 6	23,180	0 6 3
99·72	21·50	36·28	6,416 0 9	14,829	0 6 11
99·61	26·01	33·74	11,410 1 6	21,737	0 8 5
99·84	47·09	37·02	16,802 0 0	37,705	0 7 2
99·77	39·42	38·25	12,603 13 6	25,903	0 7 9
99·88	42·22	35·55	*2,95,202 9 3	516,157	0 8 1

and Northern Registration Districts which has not been included against the respective districts

STATEMENT

No.	Districts and Towns.	Population of District according to census of 1931.	Average number of Vaccinators employed throughout the year.
1	2	3	4
	B—TOWNS.		
	AHMEDNAGAR DISTRICT—		
1	Sangamner Town	15,355	.....
2	Ahmednagar Town	41,890	1
3	Ahmednagar Cantonment	11,141	M. O. 1
	POONA DISTRICT—		
4	Junnar Town	8,421	.....
5	Baramati Town	14,170	.....
6	Lonavla Town	10,694	.....
7	Poona City	162,901	2
8	Poona Suburban	16,676	1
9	Poona Cantonment	28,257	1
10	Kirkee Cantonment	9,976	M. O 1
	NASIK DISTRICT—		
11	Nasik Town	48,703	1
12	Yeola Town	16,751	1
13	Malegaon Town	32,462	1
14	Deolali Cantonment	6,114	M. O. 1
	THANA DISTRICT—		
15	Thana Town	21,816	1
16	Kalyan Town	26,291	1
	BOMBAY SUBURBAN DISTRICT—		
17	Bandra Town	45,320	1
18	Kurla Town	30,311	1
	KOLABA DISTRICT—		
19	Panwel Town	8,423	.....
20	Alibag Town	6,653	.....
21	Mahad Town	8,123	.....

No. I—*contd.*

Total number of persons vaccinated.			Average number of persons vaccinated by each Vaccinator.	Primary Vaccination.				
				Total.	Successful.			Unknown.
					Under one year.	One and under six years.	Total of all ages.	
Male.	Female.	Total.						
5	6	7	8	9	10	11	12	13
P. 174	169	343	.....	343	243	89	333	10
R. 128	.....	128						
P. 1,097	1,122	2,219	2,290	2,219	1,874	320	2,213	5
R. 52	19	71						
P. 164	122	286	368	286	239	45	286	...
R. 72	10	82						
P. 172	163	335	.....	335	156	170	328	7
R. 49	12	61						
P. 263	279	542	.....	542	419	103	523	19
R. 2	.....	2						
P. 294	288	582	.....	582	254	226	536	26
R. 776	599	1,375						
P. 3,603	3,518	7,121	4,568	7,121	5,314	1,236	6,562	559
R. 1,196	819	2,015						
P. 346	327	673	1,346	673	530	137	670	3
R. 392	291	683						
P. 592	546	1,138	3,161	1,138	895	208	1,112	26
R. 1,024	999	2,023						
P. 211	177	388	399	388	289	97	388	...
R. 6	5	11						
P. 964	913	1,877	2,345	1,877	1,385	384	1,775	100
R. 249	219	468						
P. 359	329	688	872	688	412	213	634	54
R. 148	36	184						
P. 748	717	1,465	1,676	1,465	939	211	1,158	304
R. 195	16	211						
P. 140	110	250	1,590	250	135	41	186	63
R. 827	513	1,340						
P. 572	601	1,173	4,481	1,173	698	397	1,122	43
R. 1,967	1,341	3,308						
P. 423	424	847	950	847	520	272	798	47
R. 52	51	103						
P. 1,219	1,205	2,424	9,382	2,424	1,709	685	2,421	1
R. 3,723	3,235	6,958						
P. 552	633	1,185	3,469	1,185	915	148	1,078	107
R. 1,313	971	2,284						
P. 183	155	338	.....	338	208	123	338	...
R. 148	79	227						
P. 154	155	309	.....	309	208	90	305	4
R. 287	157	444						
P. 153	136	289	.....	289	165	103	271	18
R. 6	1	7						

STATEMENT

No.	Districts and Towns.	Re-vaccination.		
		Total.	Successful.	Unknown.
1	2	14	15	16
	B—TOWNS.			
	AHMEDNAGAR DISTRICT—			
1	Sangamner Town	128	32	13
2	Ahmednagar Town	71	60	10
3	Ahmednagar Cantonment	82	79	...
	POONA DISTRICT—			
4	Junnar Town	61	1	19
5	Baramati Town	2	...	2
6	Lonavla Town	1,375	301	339
7	Poona City	2,015	108	1,635
8	Poona Suburban	683	6	666
9	Poona Cantonment	2,023	28	1,893
10	Kirkee Cantonment	11	11	...
	NASIK DISTRICT—			
11	Nasik Town	468	133	182
12	Yeola Town	184	34	55
13	Malegaon Town	211	97	56
14	Deolali Cantonment	1,340	846	398
	THANA DISTRICT—			
15	Thana Town	3,308	1,038	1,045
16	Kalyan Town	103	57	20
	BOMBAY SUBURBAN DISTRICT—			
17	Bandra Town	6,958	523	4,664
18	Kurla Town	2,284	382	1,633
	KOLABA DISTRICT—			
19	Panwel Town	227	87	6
20	Alibag Town	444	167	134
21	Mahad Town	7	4	2

No. I—*contd.*

Percentage of successful cases in which the results were known.		Persons successfully vaccinated per 1,000 of population.	Total cost of Vaccination Department.	Number of all successful vaccinations performed by the vaccination staff.	Average cost of each successful case performed by the vaccination staff.
Primary.	Re-vaccination.				
17	18	19	20	21	22
			Rs. a. p.		Rs. a. p.
100·00	19·13	23·77	.....	365	.....
99·95	98·36	54·26	1,213 0 0	2,273	0 8 6
100·00	96·34	32·76	.....	365	.....
100·00	2·47	39·07	.....	329	.....
100·00	...	36·91	.....	523	.....
9·64	29·05	78·27	.....	837	.....
100·00	29·19	40·94	2,208 15 0	6,670	0 5 4
100·00	35·29	40·54	658 2 0	676	0 15 7
100·00	21·54	40·34	792 3 0	1,140	0 11 1
100·00	100·00	39·99	.....	399	.....
99·88	46·50	39·18	1,246 2 0	1,908	0 10 5
100·00	26·36	39·81	632 7 0	668	0 15 2
99·74	62·58	38·66	749 14 0	1,255	0 9 7
93·46	89·81	168·79	.....	1,032	.....
99·29	45·87	99·01	1,357 13 0	2,160	0 10 1
99·75	68·67	32·52	851 0 0	855	0 15 11
99·92	22·80	64·96	1,100 8 0	2,944	0 6 0
100 00	58·68	48·16	1,077 8 0	1,460	0 11 10
100·00	39·37	50·46	.....	425	.....
100·00	79·52	70·95	.....	472	.....
100·00	80·00	33·85	.....	275	.....

STATEMENT

No.	District or Towns.	Population of District according to census of 1931.	Average number of Vaccinators employed throughout the year.
1	2	3	4
	B—TOWNS.		
	RATNAGIRI DISTRICT—		
22	Ratnagiri Town	23,906	.....
23	Chiplun do.	13,056	.....
24	Malwan do.	29,817	.....
25	Vengurla do.	20,158	.....
	BELGAUM DISTRICT—		
26	Belgaum	41,204	1
27	Gokak	11,866	.....
28	Athani	13,561	.....
29	Belgaum Cantonment	8,220	S. A. S. 1
	DHARWAR DISTRICT—		
30	Dharwar	41,671	1
31	Hubli	89,982	1
32	Gadag-Betigeri	45,852	1
33	Ranebennur	16,967	.....
	BIJAPUR DISTRICT—		
34	Bijapur	39,747	1
35	Bagalkot	15,597	1
	KANARA DISTRICT—		
36	Karwar	16,122	1
37	Kumtha	14,554	.....
	SATARA DISTRICT—		
38	Satara	26,379	1
39	Wai	11,760	.....
40	Karad	14,479	.....
41	Islampur	11,251	.....
42	Ashta	10,737	.....

No. I—*contd.*

Total number of persons vaccinated.			Average number of persons vaccinated by each Vaccinator.	Primary Vaccination.				
				Total.	Successful.			Unknown.
Male.	Female.	Total.			Under one year.	One and under six years.	Total of all ages.	
5	6	7	8	9	10	11	12	13
P. 458	363	821	.....	821	330	301	744	47
R. 488	187	675						
P. 289	289	578	.....	578	267	194	350	28
R. 691	451	1,142						
P. 353	303	656	.....	656	277	339	641	15
R. 309	143	452						
P. 198	176	374	.....	374	165	144	363	11
R. 669	349	1,018						
P. 787	703	1,490	2,477	1,490	1,064	275	1,342	147
R. 639	348	987						
P. 196	223	419	558	419	254	134	389	30
R. 138	1	139						
P. 213	186	399	668	399	277	111	393	5
R. 245	24	269						
P. 77	75	152	201	152	101	39	141	11
R. 20	29	49						
P. 739	753	1,492	3,028	1,492	1,284	203	1,489	1
R. 1,221	315	1,536						
P. 1,456	1,395	2,851	3,834	2,851	2,480	351	2,842	8
R. 629	354	983						
P. 787	699	1,486	2,842	1,486	1,233	119	1,353	129
R. 781	575	1,356						
P. 273	274	547	578	547	396	109	506	41
R. 30	1	31						
P. 726	733	1,459	2,055	1,459	1,018	162	1,184	273
R. 479	117	596						
P. 346	354	700	875	700	594	101	700	...
R. 175	.....	175						
P. 105	97	202	479	202	63	118	184	16
R. 219	58	277						
P. 139	129	268	316	268	5	216	252	7
R. 45	3	48						
P. 408	390	798	1,485	798	520	239	779	19
R. 508	179	687						
P. 206	205	411	418	411	365	32	399	12
R. 4	3	7						
P. 294	268	562	704	562	418	98	517	44
R. 142	.....	142						
P. 154	162	316	330	316	199	82	281	35
R. 11	3	14						
P. 202	209	411	564	411	279	93	380	30
R. 132	21	153						

STATEMENT

No.	District or Towns.	Re-vaccination.		
		Total.	Successful.	Unknown.
1	2	14	15	16
	B—TOWNS.			
	RATNAGIRI DISTRICT—			
22	Ratnagiri Town	675	208	317
23	Chiplun do.	1,142	412	429
24	Malwan do.	452	151	127
25	Vengurla do.	1,018	350	27
	BELGAUM DISTRICT—			
26	Belgaum	987	82	437
27	Gokak	139	8	19
28	Athani	269	29	76
29	Belgaum Cantonment	49	8	20
	DHARWAR DISTRICT—			
30	Dharwar ...	1,536	446	393
31	Hubli	983	40	510
32	Gadag-Betigeri	1,356	81	745
33	Ranebennur	31	4	15
	BIJAPUR DISTRICT—			
34	Bijapur	596	117	169
35	Bagalkot	175	82	33
	KANARA DISTRICT—			
36	Karwar	27	28	89
37	Kumtha	48	2	4
	SATARA DISTRICT—			
38	Satara	687	197	324
39	Wai	7	3	1
40	Karad	142	...	17
41	Islampur	14	11	3
42	Ashta	153	35	11

No. I—*contd.*

Percentage of Successful cases in which the results were known.		Persons successfully vaccinated per 1,000 of population.	Total cost of Vaccination Department.	Number of all successful vaccinations and re-vaccinations performed by the vaccination staff only.	Average cost of each successful case performed by the vaccination staff.
Primary.	Re-vaccination.				
17	18	19	20	21	22
			Rs. a. p.		Rs. a. p.
100·00	58·10	41·91	.....	982	.....
100·00	57·78	58·37	.....	762	.....
100·00	46·46	26·59	.....	792	.....
100·00	35·32	35·37	.....	713	.....
99·93	14·01	34·56	725 6 0	1,424	0 8 1
100·00	6·67	33·46	.....	397	.....
99·75	15·03	31·12	.....	422	.....
100·00	27·59	18·13	120 0 0	149	0 13 0
99·87	39·02	46·44	789 8 9	1,935	0 6 6
99·96	8·46	32·03	891 0 0	2,882	0 4 11
99·71	13·26	31·27	912 4 6	1,434	0 10 2
100·00	25·00	30·06	.....	510	.....
99·83	27·40	32·73	690 15 0	1,301	0 8 6
100·00	57·75	50·14	754 0 0	782	0 15 5
98·92	14·89	13·15	852 14 0	212	4 0 4
96·55	4·55	17·45	.....	254	.....
100·00	54·27	37·00	560 14 6	976	0 9 2
100·00	50·00	34·18	.....	402	.....
99·80	...	35·71	.....	517	.....
100·00	100·00	25·95	.....	292	.....
99·74	24·65	38·65	.....	415	.....

STATEMENT

No.	District or Town.	Population of District according to census of 1931.	Average number of Vaccinators employed throughout the year.
1	2	3	4
	B—TOWNS.		
	SHOLAPUR DISTRICT—		
43	Sholapur	144,654	2
44	Pandharpur	27,610	1
45	Barsi	29,460	1
	SURAT DISTRICT—		
46	Surat Town Circle	98,936	3
47	Rander do.	12,344	.....
48	Bulsar do.	19,481	.....
	BROACH DISTRICT—		
49	Broach Town Circle	34,276	1
50	Jambusar Town Circle	11,734	.....
51	Ankleshwar do.	12,035	.....
	KAIRA DISTRICT—		
52	Kaira Town Circle	8,316	.....
53	Mehmedabad Town Circle	7,116	.....
54	Nadiad Town Circle	34,584	1
55	Borsad do.	13,191	.....
56	Anand do.	11,660	.....
57	Umreth do.	14,779	.....
58	Dakor do.	8,493	.....
59	Kapadvanj do.	16,556	.....
	PANCH MAHALS DISTRICT—		
60	Godhra Town Circle	35,110	.....
61	Dohad do.	22,093	.....
	AHMEDABAD DISTRICT—		
62	Ahmedabad Town Circle	310,000	5
63	Dhandhuka do.	9,076	.....

No. I—*contd.*

Total number of persons vaccinated.			Average number of persons vaccinated by each Vaccinator.	Primary Vaccination.				
				Total.	Successful.			Unknown.
Male.	Female.	Total.			Under one year.	One and under six years.	Total of all ages.	
5	6	7	8	9	10	11	12	13
P. 3,559	3,573	7,132	3,900	7,132	5,241	1,047	6,333	792
R. 505	163	668						
P. 830	800	1,630	3,189	1,630	1,042	85	1,128	502
R. 1,007	552	1,559						
P. 755	749	1,504	1,695	1,504	984	119	1,109	395
R. 118	73	191						
P. 2,615	2,404	5,019	2,294	5,019	4,338	663	5,002	15
R. 1,345	518	1,863						
P. 200	189	389	448	389	124	69	196	193
R. 37	22	59						
P. 320	302	622	747	622	309	293	617	5
R. 92	33	125						
P. 1,010	984	1,994	2,247	1,994	1,755	217	1,972	16
R. 184	69	253						
P. 239	250	489	500	489	256	215	475	14
R. 9	2	11						
P. 234	235	469	498	469	239	69	313	156
R. 17	12	29						
P. 107	108	215	216	215	150	55	209	4
R. 1	.....	1						
P. 105	111	216	219	216	158	53	212	2
R. 1	2	3						
P. 804	708	1,512	2,599	1,512	1,164	284	1,452	59
R. 705	382	1,087						
P. 254	200	454	201	454	363	53	419	35
R. 108	39	147						
P. 254	259	513	1,110	513	349	150	500	8
R. 396	201	597						
P. 300	224	524	563	524	396	89	485	38
R. 29	10	39						
P. 147	134	281	293	281	200	75	275	6
R. 12	.....	12						
P. 176	214	390	407	390	307	47	354	29
R. 13	4	17						
P. 627	602	1,229	1,845	1,229	953	64	1,015	211
R. 218	398	616						
P. 352	314	666	719	666	550	76	626	36
R. 37	16	53						
P. 7,481	7,190	14,761	3,832	10,684	14,749	1,364	14,120	509
R. 2,944	1,544	4,488						
P. 167	161	328	333	328	235	91	327	...
R. 4	1	5						

STATEMENT

No.	District or Town.	Re-vaccination.		
		Total.	Successful.	Unknown.
	2	14	15	16
	B—TOWNS.			
	SHOLAPUR DISTRICT—			
43	Sholapur	668	78	206
44	Barsi	1,559	729	283
45	Pandharpur	191	34	90
	SURAT DISTRICT—			
46	Surat Town Circle	1,863	17	1,839
47	Rander do.	59	9	10
48	Bulsar do.	125	15	83
	BROACH DISTRICT—			
49	Broach Town Circle	253	25	213
50	Jambusar Town Circle	11	2	5
51	Ankleshwar do.	29	4	20
	KAIRA DISTRICT—			
52	Kaira Town Circle	1	...	1
53	Mehmedabad Town Circle	3	...	1
54	Nadiad Town Circle	1,090	80	715
55	Borsad do.	147	46	33
56	Anand do.	597	2	211
57	Umreth do.	39	5	23
58	Dakor do.	12	2	1
59	Kapadvanj do.	17	...	8
	PANCH MAHALS DISTRICT—			
60	Godhra Town Circle	616	83	252
61	Dohad do.	53	8	12
	AHMEDABAD DISTRICT—			
62	Ahmedabad Town Circle	4,489	15	4,446
63	Dhandhuka do.	5	...	...

No. I—*contd.*

Percentage of successful cases in which the results were known.		Persons successfully vaccinated per 1,000 of population.	Total cost of Vaccination Department.	Number of all successful vaccinations and re-vaccinations performed by the vaccination staff only.	Average cost of each successful case performed by the vaccination staff.
Primary.	Re-vaccination.				
17	18	19	20	21	22
			Rs. a. p.		Rs. a. p.
98·31	16·88	44·32	2,793 7 2	6,411	0 5 5
100·00	49·39	67·26	1,065 13 0	1,857	0 9 2
100·00	33·66	38·80	998 14 0	1,143	0 13 1
99·96	70·83	33·19	2,296 7 4	5,019	0 7 4
100·00	18·36	16·60	.....	205	.....
100·00	35·31	32·44	.....	632	.....
99·70	62·50	58·26	628 0 0	1,997	0 6 8
100·00	33·33	40·65	.....	477	.....
100·00	44·44	26·33	.....	317	.....
99·05	0·0	25·13	.....	209	.....
99·07	0·0	29·79	.....	212	.....
99·93	21·33	44·30	804 0 0	1,532	0 8 5
100·00	40·35	35·31	.....	465	.....
99·01	0·52	43·05	.....	502	.....
90·79	31·25	33·15	.....	490	.....
100·06	18·18	32·61	.....	277	.....
98·06	.....	21·38	.....	354	.....
99·70	22·80	31·27	.....	1,098	.....
99·36	19·51	28·69	.....	634	.....
99·61	34·88	45·59	4,897 12 3	14,135	0 5 7
99·69	.....	36·02	.....	327	.....

STATEMENT

No.	District or Town.	Population of District according to census of 1931.	Average number of Vaccinators employed throughout the year.
1	2	3	4
	B—TOWNS.		
	AHMEDABAD DISTRICT—*contd.*		
64	Viramgam Town Circle	18,965	.....
65	Ahmedabad Cantonment	2,492	1
66	Dholka Town Circle	13,743	.....
	EAST KHANDESH DISTRICT—		
67	Jalgaon Town Circle	34,375	1
68	Bhusawal do.	27,989	1
69	All other 9 Towns of East Khandesh	125,205	3
	WEST KHANDESH DISTRICT—		
70	Dhulia Town Circle	39,939	1
71	Nandurbar Town Circle	16,919	2
72	All other 5 Towns in West Khandesh	37,740	
73	Bombay City	1,161,383	11
	Total of Towns ...	3,447,588	53 M. O. 5
	Total of Dispensary Staff ...	.....	7
	Total of Private Medical Practitioners ...	.....	.....
	Total of Railway Dispensaries ...	.....	M. O. 20
	Grand Total ...	17,967,050	327 M. O. 32

No. I—*contd.*

Total number of persons vaccinated.			Average number of persons vaccinated by each Vaccinator.	Primary Vaccination.				
				Total.	Successful.			Unknown.
Male.	Female.	Total.			Under one year.	One and under six years.	Total of all ages.	
5	6	7	8	9	10	11	12	13
P. 318	300	618	670	618	366	148	514	96
R. 44	8	52						
P. 224	114	338	2,642	838	171	106	278	59
R. 1,231	1,073	2,304						
P. 295	261	556	660	556	403	72	475	81
R. 48	3	51						
P. 847	725	1,572	1,615	1,572	1,300	195	1,509	62
R. 36	7	43						
P. 467	466	933	1,007	933	303	62	568	365
R. 48	16	64						
P. 2,542	2,446	4,988	1,724	4,988	3,671	1,020	4,815	165
R. 181	4	185						
P. 893	883	1,776	1,807	1,776	1,498	237	1,736	40
R. 21	10	31						
P. 395	413	810	1,260	810	673	132	806	3
R. 1	6	7						
P. 891	804	1,695		1,695	1,062	620	1,688	6
R. 8	.....	8						
P. 21,255	20,277	41,532	34,218	41,532	26,145	10,083	36,425	4,928
R. 245,612	94,511	340,123						
P. 69,452	66,477	135,929	9,875	135,942	96,840	26,614	124,249	11,135
R. 275,199	112,213	387,412						
P. 32	26	58	1,159	58	43	15	58	...
R. 7,532	526	8,058						
P. 9	17	26	...	96	14	7	24	...
R. 43	9	52						
P. 1,231	1,052	2,283	...	2,283	1,200	824	2,157	39
R. 5,293	2,315	7,608						
P. 327,965	313,491	641,456	3,635	641,479	454,905	139,052	601,964	38,240
R. 401,982	145,144	547,126						

STATEMENT

No.	District or Town.	Re-vaccination.		
		Total.	Successful.	Unknown.
1	2	14	15	16
	B—TOWNS.			
	AHMEDABAD DISTRICT—*contd.*			
64	Viramgam Town Circle	52	1	37
65	Ahmedabad Cantonment	2,304	...	2,304
66	Dholka Town Circle	51	14	15
	EAST KHANDESH DISTRICT—			
67	Jalgaon Town Circle	43	5	14
68	Bhusawal do.	64	4	40
69	All other 9 Towns of East Khandesh ...	185	128	10
	WEST KHANDESH DISTRICT—			
70	Dhulia Town Circle	31	..	31
71	Nandurbar Town Circle	7	2	5
72	All other 5 Towns in West Khandesh ...	8	4	4
73	Bombay City	340,123	...	340,123
	Total of Towns ...	387,416	7,600	367,563
	Total of Dispensary Staff ...	8,058	5,951	171
	Total of Private Medical Practitioners ...	52	27	.....
	Total of Railway Dispensaries ...	7,698	3,672	925
	Grand Total ...	547,152	57,931	416,335

* Cost of Vaccine Institute, Belgaum, excluding profit made by sale of

No. I—*contd.*

Percentage of successful cases in which the results were known.		Persons successfully vaccinated per 1,000 of population.	Total cost of Vaccination Department.	Number of all successful vaccinations and re-vaccinations performed by the vaccination staff only.	Average cost of each successful case performed by the vaccination staff.
Primary.	Re-vaccination.				
17	18	19	20	21	22
			Rs. a. p.		Rs. a. p.
98·46	71·42	27·15	.....	515	.....
99·64	.....	113·55	.....	278	.....
100·00	38·88	35·58	.....	489	.....
99·93	17·24	44·04	638 1 0	1,514	0 6 9
100·00	16·66	20·43	688 11 10	572	1 3 3
99·83	73·14	39·47	2,863 1 9	4,943	0 9 3
100·00	.....	43·46	825 2 10	1,736	0 7 7
99·87	100·00	47·75	1,472 0 9	808	0 9 5
99·94	100·00	44·83		1,692	
99·51	.....	31·36	81,853 7 0	36,425	2 4 3
99·55	38·76	38·24	120,817 5 8	131,849	0 14 8
100·00	75·46	.....	.....	.....	.....
92·31	51·92	.....	.....	.....	.....
96·12	54·94	.....	*43,113 4 2	.....	.....
93·71	44·28	31·16	4,16,019 14 11	659,895	0 11 2

lymph to persons outside the Bombay Province.

STATEMENT

Sum

	Total number of persons vaccinated.		Total number of operations performed.		Percentage of successful cases in which results were known.	
	Primary.	Re-vaccination.	Primary.	Re-vaccination.	Primary.	Re-vaccination.
Districts excluding Towns ...	503,160	143,996	503,170	144,018	99·88	42·22
Towns	135,929	387,412	135,942	387,416	99·55	38·76
By Dispensary Staff ...	58	8,058	58	8,058	100·00	75·46
By Private Medical Practitioners.	26	52	26	52	92·31	51·92
By Railway Dispensaries ...	2,283	7,608	2,283	7,608	96·12	54·94
Total ...	641,456	547,126	641,479	547,152	99·71	44·28

No. I—*concld.*

mary.

Average number of persons vaccinated by each Vaccinator.		Number of children successfully vaccinated.		Ratio of successful vaccinations per 1,000 of population.	Total cost of Department.	Number of all successful vaccinations performed.	Average cost of each successful case.
Vaccinators employed.	Persons vaccinated by each vaccinator.	Under one year.	One and under six years.				
					Rs. a. p.		Rs. a. p.
274	2,362	356,808	111,592	35·55	...	...	...
53	9,875	96,840	26,614	38·24	...	...	...
...	...	43	15	...	...	...	...
...	...	14	7	...	...	...	...
...	...	1,200	824	...	...	...	...
327	3,635	454,905	139,052	31·16	4,16,019 14 11	659,895	0 11 2

STATEMENT

Comparative Statement showing the number of persons successfully vaccinated in each

Establishment.	Persons Primarily			
	Total Number.	Number successfully vaccinated.	Total Number.	Number successfully vaccinated.
	Years ended			
	1928-1929.		1929-1930.	
Districts excluding Towns	425,306	374,495	436,124	387,457
Towns (Municipalities and Cantonment) ...	84,555	68,145	133,345	89,183
Dispensaries and Medical Officers	237	236	1,489	1,390
Total ...	510,098	442,876	572,958	478,030

Establishment.	Persons Primarily			
	Total Number.	Number successfully vaccinated.	Total Number.	Number successfully vaccinated.
	Years ended			
	1933-1934.		1934-1935.	
Districts excluding Towns	480,292	448,736	486,345	452,645
Towns (Municipalities and Cantonment) ...	97,362	90,725	132,256	121,760
Dispensaries and Medical Officers	2,273	2,186	2,723	2,530
Total ...	579,927	541,647	621,324	576,935

No. II.

primarily vaccinated and the number of those persons who were of the undermentioned official years.

VACCINATED.

Total Number.	Number successfully vaccinated.	Total Number.	Number successfully vaccinated.	Total Number.	Number successfully vaccinated.
ON 31ST MARCH					
1930-1931.		1931-1932.		1932-1933.	
414,423	373,567	436,750	403,212	476,366	444,416
79,321	64,654	96,917	77,455	113,804	103,505
684	612	766	751	1,814	1,723
494,428	438,673	534,433	481,418	591,984	549,644

VACCINATED—*contd.*

Total Number.	Number successfully vaccinated.	Total Number.	Number successfully vaccinated.	Total Number.	Number successfully vaccinated.
ON 31ST MARCH—*contd.*					
1935-1936.		1936-1937.		1937-1938.	
487,994	456,634	485,870	459,478	503,160	475,476
119,534	111,055	117,769	109,964	135,929	124,249
1,822	1,617	1,604	1,504	2,367	2,239
609,350	569,306	605,243	570,946	641,456	601,964

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